

COND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.  
 AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

**FILED**  
**Apr 30, 1999 8:00 am**  
**Secretary of State**

04-30-1999 90116 015 \*\*\*150.00



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

PROFIT CORPORATION  
 ANNUAL REPORT  
**1999**

DOCUMENT # **P95000046512** ✓  
 Corporation Name  
**DISTINCTIVE DISTRIBUTORS, INC.**



Principal Place of Business  
**55 CHARLES ST  
 LONGWOOD FL 32750**

Mailing Address  
**115 CHARLES ST  
 165  
 LONGWOOD FL 32750  
 US**

DO NOT WRITE IN THIS SPACE

Principal Place of Business  
**25** Suite, Apt. #, etc.  
**27** City & State  
**28** *Longwood FL*  
 Zip Country  
**29** *32750* **30** *US*

3. Date Incorporated or Qualified  
**06/08/1995**

4. FEI Number  
**59-3320063** Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution  **\$5.00** May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property.  Yes  No

9. Name and Address of Current Registered Agent  
**MANNING, WILLIAM D  
 1155 CHARLES ST  
 165  
 LONGWOOD FL 32750**

10. Name and Address of New Registered Agent  
**81** Name *Butterfield, Lance*  
**82** Street Address (P.O. Box Number is Not Acceptable)  
*1155 Charles Street*  
**83** *#165*  
**84** City *Longwood, FL* **85** Zip Code *32750*

I, Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE *Lance Butterfield* DATE *6/30/99*  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

OFFICERS AND DIRECTORS		13.
LE	<b>D</b> <input checked="" type="checkbox"/> DELETE	1.1 TITLE
ME	<b>MANNING, WILLIAM D</b>	1.2 NAME
REET ADDRESS	<b>1155 CHARLES ST</b>	1.3 STREET ADDRESS
Y-ST-ZIP	<b>LONGWOOD FL 32750</b>	1.4 CITY-ST-ZIP
LE	<input type="checkbox"/> DELETE	2.1 TITLE
ME		2.2 NAME
REET ADDRESS		2.3 STREET ADDRESS
Y-ST-ZIP		2.4 CITY-ST-ZIP
LE	<input type="checkbox"/> DELETE	3.1 TITLE
ME		3.2 NAME
REET ADDRESS		3.3 STREET ADDRESS
Y-ST-ZIP		3.4 CITY-ST-ZIP
LE	<input type="checkbox"/> DELETE	4.1 TITLE
ME		4.2 NAME
REET ADDRESS		4.3 STREET ADDRESS
Y-ST-ZIP		4.4 CITY-ST-ZIP
LE	<input type="checkbox"/> DELETE	5.1 TITLE
ME		5.2 NAME
REET ADDRESS		5.3 STREET ADDRESS
Y-ST-ZIP		5.4 CITY-ST-ZIP
LE	<input type="checkbox"/> DELETE	6.1 TITLE
ME		6.2 NAME
REET ADDRESS		6.3 STREET ADDRESS
Y-ST-ZIP		6.4 CITY-ST-ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	<b>D</b>
	<i>Butterfield, Lance</i>
	<i>1155 Charles Street</i>
	<i>Longwood, FL 32750</i>
<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Change <input type="checkbox"/> Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Lance Butterfield* DATE: *6/30/99* PHONE: *407-339-7345*

CR2E034 (5/99)