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Feb 06 1997 8:00am  
Secretary of State

PROFIT CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000048821 (9)

1. Corporation Name  
DICK ZIMMERMAN ASSOCIATES, INC.

Principal Place of Business  
2486 PADDOCK WAY  
OVIEDO FL 32765

Mailing Address  
2486 PADDOCK WAY  
OVIEDO FL 32765-8068



3. Date Incorporated or Qualified 06/19/1995  
3a. Date of Last Report 05/01/1996

2. Principal Place of Business

21 Suite, Apt #, etc

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt #, etc.

27 City & State

28 Zip

30 Country

4. FEI Number

59-9929235

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 has liability for intangible tax under s. 199.032, Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

ZIMMERMAN, DICK L  
2486 PADDOCK WAY  
OVIEDO FL 32765

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

I do 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P DELETED  
NAME ZIMMERMAN, RICHARD L  
STREET ADDRESS 2486 PADDOCK WAY  
CITY-ST-ZIP OVIEDO FL 32765

TITLE DELETED  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE DELETED  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE DELETED  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE DELETED  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE DELETED  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE Change Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE Change Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE Change Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE Change Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE Change Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do 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:

SIGNATURE REQUIRED  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/29/97

Date

407.366.0141

Daytime Phone

CR2E034 (9/96)