## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS P95000052101 (9) DOCUMENT # 1. Corporation Name DEE LYN PROPERTIES, INC. Principal Place of Business Mailing Address 546 12TH STREET WEST 546 12TH STREET WEST **BRADENTON FL 34205 BRADENTON FL 34205** 3. Date Incorporated or Qualified 3a. Date of Last Report 07/03/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 21 Applied For 26 Not Applicable Suite, Apt. #. etc. Suite, Apt. #, etc \$8.75 Additional 22 Certificate of Status Desired Fee Required City & State City & State Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Zip Added to Fees Country Ζφ Country 8. This corporation has liability for intangible tax under s 199.032, 24 25 29 30 Florida Statutes V∏ Yes □ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name Cabanillas, Denise Street Address (P.O. Box Number is Not Acceptable) 82 546 12TH STREET WEST **BRADENTON FL 34205** 83 84 City Zip Code 85 11. 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 affice familiar with, and accept the obligations of, Section 607.0505, Florida Statutes SIGNATURE Signature, typed or printed name of registered agent and title if accordable (NOTE: Ri-gistered Agord signature required when reinstating) 12. DATE OFFICERS AND DIRECTORS (12/95)13 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1. 1 TILLE Change Addition CABAANILLAS, DENISE NAME 1.2 NAME 546 12TH STREET WEST CR2E034 STREE1 ADDRESS 1.3 STREET ADDRESS **BRADENTON FL 34205** CITY-ST-ZIP 1.4 CITY-ST-ZIP THILE DELETE 2. 1 TITLE LUCAS, LINDA Change Addition NAME 2.2 NAME 546 12TH STREET WEST STREET ADDRESS 23 STREET ADDRESS **BRADENTON FL 34205** CITY-ST-ZIE 24 CITY - ST - 71P TITLE DELETE 3. 1 TIRE ☐ Change Addition NAME 3.2 NAME STREET ADDRESS 3.3. STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP TITLE DELE 16 4. 1 TITLE Change ☐ Add/tion NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP TITLE DELETE 5 1 TOLE Change Middlifon Addition NAME 100001855 -06/07/96--01012 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS \*\*\*200.00 CITY-ST-Z:P 5.4 CITY - ST - 2(F TITLE DELETE 6 1 TITLE NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b). Florida Statutes, I further certify that the information flowated 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 coath; 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 6.4 CITY - ST- ZIP

SIGNATURE: