FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **P95000053963 (1)**

1. Corporation Name
D & M BUSINESS CONSULTING, INC.

Principal Place of Business	Mailing Address
13561 EAGLE RIDGE DR., UNIT 1025 FT. MYERS FL	13561 EAGLE RIDGE DR., UNIT 1025 FT. MYERS FL

3. Date Incorporated or Qualified: 07/10/1995
3a. Date of Last Report:

2. Principal Place of Business (21): 432 SE. 9th Place
Suite, Apt. #, etc. (22):
City & State (23): Cape Coral, Florida
Zip (24): 33990 Country (25): U.S.A.

2a. Mailing Address (26):
Suite, Apt. #, etc. (27):
City & State (28):
Zip (29): Country (30):

4. FEI Number: 65-0664649 ☐ 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

LURIE, TERRY A
2430 SHADOWLAWN DR., STE. 18
NAPLES FL 33962

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

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 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: [signature] Daniel W. Bibb DATE: 4/30/96

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D ☐ DELETE	1.1 TITLE	President ☑ Change ☐ Addition
NAME	BIBB, DANIEL W	1.2 NAME	Daniel W. Bibb
STREET ADDRESS	13561 EAGLE RIDGE DR., UNIT 1025	1.3 STREET ADDRESS	432 S.E. 9th Place
CITY-ST-ZIP	FT. MYERS FL	1.4 CITY-ST-ZIP	Cape Coral, Florida 33990
TITLE	D ☐ DELETE	2.1 TITLE	Secretary/Treasurer ☑ Change ☐ Addition
NAME	LEWIS, MARY E	2.2 NAME	Mary E. Lewis
STREET ADDRESS	13561 EAGLE RIDGE DR., UNIT 1025	2.3 STREET ADDRESS	1738 S.E. 29th Lane
CITY-ST-ZIP	FT. MYERS FL	2.4 CITY-ST-ZIP	Cape Coral, Florida 33904
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	100001864531
STREET ADDRESS		6.3 STREET ADDRESS	-06/18/96--01010--051
CITY-ST-ZIP		6.4 CITY-ST-ZIP	***200.00

CR2E034 (12/95)

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)(k), 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] 4/30/96 941-456-2705
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone Number

Daniel W. Bibb 05/1/96