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**PROFIT** CORPORATION ANNUAL REPORT



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

1996

DOCUMENT #

P95000068672 (1)

D.J.L. PROPERTIES, INC.

Principal Place of Business Mailing Address 400 S.E. 123RD STREET ROAD 400 S.E. 123RD STREET ROAD OCALA FL 34480 OCALA FL 34480 3. Date Incorporated or Qualified 3a. Date of Last Report 09/01/1995 2. Principal Place of Business FEL Number 2a. Mailing Address Applied For 21 26 Not Applicable Suite, Apt. #. etc. Suite, Apt. #, etc. \$8.75 Additional 5. 22 汝 27 Fee Required City & State City & State 6. Election Campaign Financing **\$5.00** May Be 23 28 Trust Fund Contribution Added to Fees  $Z_{ID}$ Zio Country 8. This corporation has liability for inlangible tax under s. 199.032, 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BROADY, DIANA L 82 Street Address (P.O. Box Number is Not Acceptable) 400 S.E. 123RD STREET ROAD OCALA FL 34480 83 84 City 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, typed or printed name of regestered agent and title it applicable (NOCE, Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS CR2E034 (12/95) 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 D TILE DELETE 1. 1 TITLE ☐ Change Addition BROADY, DIANA L NAME 1.2 NAME 400 S.E. 123RD STREET ROAD STREET ADDRESS 1.3 STREET ADDRESS OCALA FL 34480 CITY - ST-ZIP 1.4 CHY-ST-ZIP TITLE DELETE 2 1 TITLE Change Add tion NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY - ST - ZIP 2.4 CITY+ST-ZIP TIFLE DELETE 3 1 TIFLE Change ☐ Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS C-TY-ST-ZIP 3.4 Cily - \$1, 20° 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 54 CITY-ST ZIP TITLE DELETE 6 1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS

6.3 STREET ACCRESS

6.4 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)(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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

CITY - ST - ZIP

2/28/96 904-245-6681