FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000086394 (0)

DONALD DOCKS, INC.

Principal	Place	of	Business
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400 NW AUCE STREET STUART FL 34994 Mailing Address

400 NW ALICE STREET STUART FL 34994-1008

FILED Apr 30 1997 8:00am Secretary of State



					3. Date Incorporated or Qualified 11/08/1995	3a. Date of Last Report 07/24/1996		
2. Principal Pi	lace of Business	2a. Mailing Address			4. FEI Number Applied For			
21 400 A		26 SAME AS # 2			65-0623117 Not Applica			
Suite, Apt.	#, etc	Suite, Apt #, etc.		~		C9 75 Additional		
22	12.	27			5. Certificate of Status Desired	Fee Required		
City & Stat	City & State				6. Election Campaign Financing	\$5.00 May Be		
23 572	TUART FLORISA 28				Trust Fund Contribution Added to Fees			
Zip Country Zip C			Country	/	8. This corporation has liability for intangible tax under s. 199.032,			
24 34 <i>9</i>	34994 25 USA 29 30				Florida Statutes X Yes No			
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered Agent			
MAG	RANE, DANIEL E		81	81 Name				
5633 SE LAMAY DR STUART FL 34997				82 Street Address (P.O. Box Number is Not Acceptable)				
				Credit Addition (1) to the Manual of Mot Mesophania				
1	•		83	Ţ				
ı						las I 3% Octo		
			84	,		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. Thereby 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 registered agent and titler applicable (NOT). In gistered Agent's gnature required when re-installing). DATE								
12.	OFFICERS AND		13.	eni signature requ	ADDITIONS/CHANGES TO OFFICE			
TITLE	n Cornochio AIND	DELETE	1.1 TITLE		ADDITIONO/OFFICE TO OFFICE	Change Addition		
NAME	MAGRANE, DANIEL E	□ becele	1,2 NAME	3	WOO TANGTTE H.	Silango La vidonion		
- 1	400 NW ALICE STREET		1	I ADORESS	ON AVAILE AVE			
STREET ADDRESS	STUART FL 34994			I ADORESS	AYLOR, JANETTE H. OO NW ALICE AUE. TUART, FL. 3499	<u>.</u>		
CITY-ST-ZIP TITLE	D D	DELETE	1.4 C(TY - 1 2.1 T(TLE	51.70	MARI, FA. STILL	Change Addition		
NAME	SCOTCHEL, GUY W JR	_ bittle	2.2 NAME			Origings Production		
	400 NW ALICE STREET							
STREET ADDRESS	STUART FL 34994		-	ADDRESS				
CITY-ST-ZIP TITLE	OTDANT IE STOOT	DELETE	2 4 CITY- 3 1 TITLE	S1-ZIP		Change Addition		
		C office				Change L. Abunton		
NAME			3.2 NAME					
STREET ADDRESS				I ADDRESS				
CITY-ST-ZIP		DUETE	3.4. CITY -	ST-ZIP		Channe		
TITLE		DELETE	4.1 TITLE			Change Addition		
NAME			4. 2 NAME					
STREET ADDRESS				I ADDRESS				
CITY-ST-ZIP		T on the	4.4 C(1)Y	\$1- ZIP				
TITLE		☐ DELETE	5.17(11.8			☐ Change ☐ Addition		
NAME			: 5.2 NAME					
STREET ADDRESS			5.3 STREE	T ADDRESS		•		
CITY-ST-ZIP	-	····	5.4 C/TY -	S1-2IP				
TITLE		DELETE	61 TPILE			L Change L Addition		
NAME			G 2 NAME					
STREET ADDRESS			6 3 STREE	1 ADDRESS				
CITY-ST-ZIP			6.4 D(TY-)					
14. I do herek	by certify that the information supplied	with this filing does not quali	fy for the exe	emption state	d 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 12 if changed, or on an attachment with an address.

SIGNATURE

DANIEL E Manane 4/2/17561-692-233