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Apr 15 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 # P96000001910 (4)

1. Corporation Name

DLM COMPUTER SOLUTIONS INC.



Principal Place of Business

1126 HIGHLAND STREET NORTH
ST. PETERSBURG FL 33701

Mailing Address

1126 HIGHLAND STREET NORTH
ST. PETERSBURG FL 33701-1537

3. Date Incorporated or Qualified

01/02/1996

3a. Date of Last Report

2. Principal Place of Business

21 10158 64th Ave. N.

2a. Mailing Address

26 P.O. BOX 7918

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. FEI Number

59-3355664

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

22 City & State

23 Seminole, FL

27 City & State

28 St Petersburg, FL

Zip

24 34642

Country

Zip

29 33734

Country

30

9. Name and Address of Current Registered Agent

MARCUM, DEBORA L
1126 HIGHLAND STREET NORTH
ST. PETERSBURG FL 33701

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 provisions of, Section 607.0505, Florida Statutes.

SIGNATURE

Deborah L. Marcum

(NOTE: Registered Agent signature required when reinstating)

2-3-97

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE
NAME MARCUM, DEBORA L
STREET ADDRESS 1126 HIGHLAND STREET NORTH
CITY-ST-ZIP ST. PETERSBURG FL 33701

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President ☒ Change ☐ Addition
1.2 NAME Marcum, Debora L.
1.3 STREET ADDRESS P.O. BOX 7918 N/A
1.4 CITY-ST-ZIP St Petersburg, FL 33734

2.1 TITLE Vice President ☐ Change ☒ Addition
2.2 NAME Roxanne Spear
2.3 STREET ADDRESS 10158 64th Avenue N.
2.4 CITY-ST-ZIP Seminole, FL 34642

3.1 TITLE Treasurer ☐ Change ☒ Addition
3.2 NAME Carolyn L. Hicks
3.3 STREET ADDRESS 2401 60th Avenue N.
3.4 CITY-ST-ZIP St Petersburg, FL 33714

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
Carolyn L. Hicks

812-822-7722

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)