

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

FILED

Jan 22 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 # P96000004833 (5)

1. Corporation Name
DUDLEY & GRINCH, INC.



Principal Place of Business
149 EDMERE WAY SOUTH
NAPLES FL 33999

Mailing Address
149 EDMERE WAY SOUTH
NAPLES FL 34105-7108

3. Date Incorporated or Qualified 01/16/1996
3a. Date of Last Report

2. Principal Place of Business 21 350 EDMERE WAY E
2a. Mailing Address 26 350 EDMERE WAY E
4. FEI Number 65-0641194
Applied For Not Applicable

22 Suite, Apt. #, etc. 27 Suite, Apt. #, etc.
5. Certificate of Status Desired \$8.75 Additional Fee Required

23 City & State NAPLES, FLA 28 City & State NAPLES, FLA
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

24 Zip 34105 25 Country U.S.A. 29 Zip 34105 30 Country U.S.A.
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent

LYNCH, ANN
149 EDMERE WAY SOUTH
NAPLES FL 33999

81 Name
82 Street Address (P.O. Box Number is Not Acceptable) 350 EDMERE WAY EAST
83
84 City NAPLES FL 85 Zip Code 34105

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] ANN LYNCH, VICE PRESIDENT JAN 10/97
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LYNCH, TERENCE F 149 EDMERE WAY SOUTH NAPLES FL 33999	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	Change Addition 350 EDMERE WAY EAST NAPLES, FLA 34105
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	Change Addition

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 or changed, or on an attachment with an address.

SIGNATURE: [Signature] ANN LYNCH, VICE PRESIDENT JAN 10/97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (94) 649-6733

CR2E034 (9/96)