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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

· 1997

2. Principal Paice of Business

DOCUMENT # P96000017276

1. Composition Name

DOOLLITTLE & COMPANY, INC.

Principal Place of Business
2711 BLAIRBROWE LANE
TAUAHASSEE, FL 32301

21 2711 BLAIRSTONE LAWE

Mailing Address

2a. Mailing Address 26 P.O. BOX 67

P.O. BOX 671 TRUMHAGGE FL. 32302-007/ FILED
May 06 1997 8:00am
Secretary of State

3a. Date of Last Report

Applied For

Not Applicable

3. Date Incorporated or Qualified 2/22/46

22	~	27		5. Certificate of Status Desired	Fee Required
City & State	,	City & State	F/	6. Election Campaign Financing	\$5.00 May Be
23 TACLAHASS	EE ITL	28 ALLAHAG	see fu	Trust Fund Contribution	Added to Fees
Z(p)	Country	Zip	Country	8. This corporation has liability for	
24 32301	25 USA		10 USA		Yes ANO
9. Na:	me and Address of Curren	t Registered Agent	81 Name	10. Name and Address of New I	legistered Agent
STEN SI	-iger		81 Name		
NAROES (-19	N IN & NIEUEDO	au A A A	82 Street Address (P.O. Box Number is Not Acceptable)		
215 5 C	BLIN, & NICHERS ALHOUN, SUM RE, FL 32301	- SOO	63		
TALLALACE	~ E/ 32201	6 940	[00]		
1 Mary Hills	ee, the same		84 City		85 Zip Code
44 Dura put to the ave	in one of Continue CO7 OFO	2 and COT 1500 Florido Statuto			FL S Zip Code
<ul> <li>office or registered.</li> </ul>	agent, or both, in the State -	of Florida. Such change was au	thorized by the corpor	orporation submits this statement for the ration's board of directors. I hereby acc	<ul> <li>purpose of changing its registered ept the appointment as registered</li> </ul>
agent. Lam familiar	with and accept the obliga	itions of, Section 607.0505, Flor	da Statutes		,
SIGNATURE	r color priviled name of teg stered age:	or and tills if symbols /W/TE:	Registered Agent signature red	a incl when relational	EMTE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFF	
7001		DELETE		REGIDENT	Change Applifon
NAM:		<del></del> -	1.2 NAME	Engly E b	· · · · · · · · · · · · · · · · · · ·
STEEL LAT DRESS			13 STREET ADDRESS	PANE E DOCLITTE WAY	4
City - St - 7/F			1.4 CITY-ST-ZIP	TAUAHASSEE KL	3.23cR
TitleF		DELETE	21 TITLE		Change Addition
NAME.			22 NAME		
STREET ADDRESS			23 STREET ADDRESS		
Offy-St-ZiP			2 4 CITY-ST-ZIP		
THLE		☐ DELE1E	31 TITLE		☐ Change ☐ Addition
N4Mt			3.2 NAME		
\$7PHTA:00RESS			3.3 STREET ADDRESS		
CHA 2, 105			3.4. CITY - S1 - 71P		
Tillié		☐ DELETE	4.1 TITLE		Change Addition
NAME			4 2 NAME		
STREET ADDRESS.			4.3 STREET ADDRESS		<i>i</i> .
City St Zii	/h		44 CHY-ST-ZIP		
Title		DELETE	5 1 TITLE		Change Addition
AM!			52 NAME		18/04/1.100
STREET ADMINISTRA			5.3 STREET ADDRESS		フリハイタリイナ
20 St 7			5.4 CHY-ST-ZIP		
151.8		DELETE.	61 TITLE	والمان المساور	Change Addition
AMI			6.2 NAME	8000021 -05/09/97010	(
PRECLAR TOTALS			6.3 STREET ADDRESS	-05/03/3/010	JUと==U3U
TY - S1 70°	nn - January an ann an ann an ann an ann an ann an a		64 CHY-ST-ZIP	***165.00	
<ol> <li>I do hereby cerbly t information reducate</li> </ol>	hat the information supplied	with this filing does not qualify	for the exemption state	led in Section 119.07(3)(i), Florida Statul lat my signature shall have the same leg	es. I further certify that the
Largas officer or di	rector of the corporation or	the receiver or trustee empower	ed to execute this ren	iort as required by Chapter 607. Florida	jai enect as il made under dath; that Statutes: and that my name