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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra Br Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000020113 (2)

D.C. DRIVES OF CENTRAL FLORIDA, INC.

Principal Place of Business

Mailing Address

2705 BRANDON VIEW DRIVE BRANDON FL 33511 2705 BRANDON VIEW DRIVE BRANDON FL 33511-7539

## FILED Apr 08 1997 8:00am Secretary of State



BRANDON FL 33511		BHANDON FL 33511-7538							
						3. Date incorporated or Qualified 03/04/1996	3a. Date of	Last Re	port
2. Principal Place of B		2a. Mailing Address		1	. (	4, FEI Number		Apr	plied For
211 215A Fo	aulkenburg Rd	26 DC Drives	of-C	ers	tral FL	65-0656709		No	t Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc. 27 215A Fau				5. Certificate of Status Desired	□ <b>\$</b>	8.75 A Fee Re	dditional quired
City & State	~ .	City & State	<b>;</b> =			6. Election Campaign Financing		\$5.00	May Be
23	- L-	28 lampa,		<u> </u>		Trust Fund Contribution	<del></del>	Added to	
24 33619	Country 25 USA	(=-1	Cour	ntry	A		Yes N	0	199.032,
9, Na	me and Address of Current R	Registered Agent			· · · · · · · · · · · · · · · · · · ·	10. Name and Address of New Re	glatered Ager	<u>nt</u>	
FESPERMA	N, JAMES C JR.			B1	Name				
2705 BRANDON VIEW DRIVE					Street Addr	ess (P.O. Box Number is Not Acceptate	ole)		
Brandon	FL 33511		Į						
•				63					
•			ŀ	84	City	LL. W. W. C.	FL 8	5 Zip C	Code
11 Pursuant to the nr	ovisions of Sections 607 0502 a	and 607 1508. Florida Statutes	s the at	l	named corp	oration submits this statement for the p	ourpose of cha	nging it	s registered
office or registered agent. I am familia	I agent, or both, in the State of ir with, and accept the obligation	Florida, Such change was at	uthorizec	ı by	the corporati	ion's board of directors. I hereby accep	ot the appointr	nent as	registered
SIGNATURF Signature :	ypod or printed name of registered agent a	and title if applicable. (NOTE:	Registered	Ager	ni signature requir	ed when reinstating)	DATE		
12.	OFFICERS AND D	DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC			
TILLE <b>D</b>	,	DELETE	1.1 TIT	LE				Change	Addition
NAME FESP	ERMAN, JAMES C JR.		1.2 NA	ME					
STREET ADDRESS 2705	BRANDON VIEW DRIVE		1.3 ST	REET	ADDRESS				
CITY-ST-ZIP BRAN	IDON FL 33511		1.4 CF	IY - S1	r• ZIP				
TITLE D		DELETE	2.1 111	LE				Change	Addition
NAME KUBA	l, Jeffrey W		2.2 NA	ME	Ì				
	HUTCH COURT		2.3 ST	REET	ADDRESS				
	IDON FL 33511		2. 4 CI	TY - \$	T- 21P	ere ere er	12.7		
TITLE		DELETE	3.1 111	LE				Change	Addition
NAME			3.2 N	ME					
STREET ACORESS			3.3 \$1	REET	ADDRESS				
CITY-ST-ZIP			34.0	ITY-S	T-ZIP				
10LE		DELETE	4.1 T)	rl.E				Change	Addition
NAME			4. 2 N	AME					
STHEET ADDRESS			4.3 \$1	REET	ADDRESS				
CITY - ST - ZIP			4.4 CI	TY-S	T-ZIP				
TITLE		DELETE	5.1 71	TLE				Change	Addition
NAME			5.2 N	ME				,	
STREET ADDRESS			5.3 S1	REET	ADORESS				
CITY SI-7IP			5.4 C)	TY-5	T- <b>2</b> IP				
TITLE		DELETE	6.1 Tr	_				Change	Addition
NAME			6.2 N/	AME					
STREET ADDRESS			6.3 S1	REET	ADDRESS				
					T-ZIP				
City-S1-7iP	that the information supplied :	with this filling dogs not qualify				t in Section 119 07/3Vi). Florida Statute	e I further co	rtify that	the

information indicated on this annual report or 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.

NATURE AND THE OF SINITED WANTE OF SIGNING OFFICER OF DIRECTOR

3/4/07

51-18/7 Daylime Phone #