

3-11-98 B 3125 C
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Mar 11 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000055205 (4)

1. Corporation Name
D.L.C., INC.

Principal Place of Business

1730 E 7TH AVE
TAMPA FL 33605
US

Mailing Address

1730 E 7TH AVE
TAMPA FL 33605
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

g. Name and Address of Current Registered Agent

CHAPMAN, DAVID L.
4255 W HUMPHREY ST
#1912
TAMPA FL 33614

3. Date Incorporated or Qualified

06/28/1996

4. FEI Number

59-3386164

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be

Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

CHAPMAN, DAVID L.

82 Street Address (P.O. Box Number is Not Acceptable)

1730 E. 7TH AVE

83

84 City

TAMPA

FL

85 Zip Code

33605

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PSTD ☐ DELETE

NAME CHAPMAN, DAVID L

STREET ADDRESS 4255 WEST HUMPHREY STREET, UNIT 1912

CITY-ST-ZIP TAMPA FL 33614

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

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

PRINCIPAL T/D ☐ Change ☒ Addition

1.2 NAME

DAVID M GRANSER

1.3 STREET ADDRESS

1706 LARABIE COURT

1.4 CITY-ST-ZIP

BRANDON FL 33511

2.1 TITLE

PRINCIPAL S/D ☐ Change ☒ Addition

2.2 NAME

BRUCE W KENIGHT

2.3 STREET ADDRESS

736 TUSCANY ST

2.4 CITY-ST-ZIP

BRANDON FL 33511

3.1 TITLE

☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

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 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 an authorized trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 of this filing. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: DAVID L CHAPMAN

WITNESS: BRUCE W KENIGHT

3/10/98 813 242 8211

CR2E034 (10/97)