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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000066271 (3)

DUNCAN	i sales group, inc.				
Principal Piac 8050 SEMINOLI SEMINOLE FL	E MALL	Mailing Address 8050 SEMINOLE MALL SEMINOLE FL 33772-4778		1 1001/1001 127 48210 07(1) 004/4 F9221 00(1)	! QUINE BRAIS BUILT FRENK 1887 1887 1884 1884
				3. Date Incorporated or Qualified 08/08/1996	3a. Date of Last Report
2. Principal P	Place of Business	2e. Mailing Address		4. FEI Number 59 - 3421414	Applied For Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. # otc. 27 Suit 1 # 221		Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	28 Zip	Country	Trust Fund Contribution  8. This corporation has liability for	Added to Fees
24	25		30	Florida Statutes	Yes No
MOC	9. Name and Address of Current ORMACK, J R	r Hegistered Agent	81 Name	10. Name and Address of New Re	gistered Agent
J. R( 2655	OBERT MCCORMACK, P.A. I MCCORMICK DRIVE ARWATER FL 34619			ress (P.O. Box Number is Not Acceptal	ble)
			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 obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE					
12.	Signature, typed or printed name of registered age: OFFICERS ANI		Registered Agent signature require 13.	ADDITIONS/CHANGES TO OFFIC	DATE CERS AND DIRECTORS IN 12
TITLE	PD	DELETE	1.1 TITLE	1,5511,611,615,611,615	Change Addition
NAME	DUNCAN, JAMES G		1.2 NAME		•
STREET ADDRESS	1501 GULF BLVD. UNIT 101		1.3 STREET ADDRESS		
CITY-ST-ZIP	CLEARWATER BEACH FL 3463		1.4 CITY - ST - ZIP		
TITLE	STD	☐ DELETE	2.1 Talle		Change Addition
NAME	DUNCAN, ANGELA R		2.2 NAME		ļ
STREET ADDRESS	1501 GULF BLVD. UNIT 101		2 3 STREET ADDRESS		
CITY-ST-ZIP	CLEARWATER BEACH FL 3463		2 4 CiTY-ST-ZIP		
TITLE		[_] DELETE	31 TITLE		Change Addition
NAME			3.2 NAMÉ		+
STREET ADDRESS			3.3 STREET ADDRESS		}
CITY-ST-ZIP TITLE		DELFT[	3.4. C(TY - ST - Z)P		Change Addition
NAME			4.1 FITLE		Change Addition
STREET ADDRESS			4. 2 NAME 4.3 STREET ADORESS		
CITY-ST-ZIP TITLE		DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		Change Addition
NAME		Day would	5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME	}		6.2 NAME		
STREET ADDRESS			63 STREET ADDRESS		
	ı				I

14. I do hereby certify that the information supply d 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 unnual report of 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 of the color of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 of Block 13 if changing or on an Machinent with an address.

1.15.90

393-1205

**FILED** 

Apr 29 1997 8:00am

Secretary of State