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

**CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P96000095946 (5)

DEHART EXECUTIVE SERVICES, INC.

## **FILED** Apr 21 1998 8:00am Secretary of State

					······································		
Principal Place of Business		Mailing Address				( AEGUGE) (19 (2015 BILL BEIL) EBIN BEIN GE	in inter dirit finit dinte bili ibdi
5914 APPALOOSA WAY		5914 APPALOOSA WAY					
ORLANDO FL 32822		ORLANDO FL 32822				DO NOT WRITE IN TH	HIG GDACE
						3. Date Incorporated or Qualified	III BEAGE
						11/25/1996	
2. Principal F	Place of Business	2a. Mailing	Address			4. FE! Number	Applied For
21		26	,			59-3412035	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.					\$8.75 Additional
22		27	27			5. Certificate of Status Desired	Fee Required
City & State			City & State			6. Election Campaign Financing	\$5.00 May Be
23		28	28			Trust Fund Contribution	Added to Fees
Zip Country		Zip	Zip Country		/	8. This corporation owes or has paid the	current year Intangible
24	25	29		30		Personal Property Tax due June 30.	☐ Yes 🕻 No
	9. Name and Address of Curren	it Registered Ag	gent	81	* * * * * * * * * * * * * * * * * * * *	10. Name and Address of New Register	ed Agent
DEHART, EDITH					Name		
5914 APPALOOSA WAY			82	Street Ad	dress (P.O. Box Number is Not Acceptable)		
0	RLANDO FL 32822				Oli oct rice	areas (i.e. box (turnor is real rises)).	
				83			
				84	City		- 85 Zip Code
				07	City	F	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the at					e-named co	orporation submits this statement for the purpos	e 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. Lam familiar with, and accept the obligations of Section 607.0505. Florida Statutes.							
SIGNATURE							
SIGNATORE	Signature, typical or printed name of requirered age	ods a qualit ord bira lm	(NOII)	Registerea Age	ont signature req	quired when reinstating) DAT	· ·
12.	OFFICERS ANI			13.		ADDITIONS/CHANGES TO OFFICERS	
TITLE	PD	l	L.J DELETE	1.1 TITLE			Change Addition
NAME	DEHART, EDITH			1.2 NAME			;
STREET ADDRESS	5914 APPALOOSA WAY			1.3 STREET	ADDRESS		
CITY-ST-ZIP	ORLANDO FL 32822			1.4 CITY - 9	1- ZIP		(
TITLE	VPTD		DELETE	2.1 TITLE			Change Addition
NAME	DEHART, JOSEPH			2.2 NAME			
STREET ADDRESS	5914 APPALOOSA WAY			2.3 STREE1	ADDRESS	•	
CITY-\$T-ZIP	ORLANDO FL			2 4 CITY-	ST- ZiP		
TITLE	80	l	] DELETE	3.1 TITLE			Change Addition
NAME	LEWIS, ERIC	OUDT		3.2 NAME			
STREET ADDRESS	8614 BANNERMAN BLUFF C	OURI		3 3 STHEFT	ADDRESS		
CITY-ST-ZIP	TALLAHASSEE FL 32312		Trues	3 4. CHY-	ST - 7IP		
TITLE		L	DELETE	4.1 TITLE			☐ Change ☐ Addition
NAME				4. 2 NAME			
STREET ADDRESS				4.3 STREET			
CITY-ST-ZIP			Therese.	4.4 City - S	1 - Z(P		
THILE		L	DECETE	5.1 TITLE			☐ Change ☐ Addition
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET	1		
CITY-ST-ZIP			Toriere.	5.4 CITY-S	1-ZIP		
TITLE		Ł	DLTELE	6.1 TITLE			Change Addition
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET			
CITY - ST - ZIP		54 TABLE 200 2004		6.4 CITY - S	1-7IP	0	

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 eath; 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.