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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

19700026026028 DOCUMENT

1. Corporation Name

Dobbs Rental, Inc.

Principal Place of Business

Mailing Address

4657 South Hwv. 1

FILED

99 JUN - 9 ANTH: 05

STORETABY OF STATE TALLAHASSEE, FLORIDA

Rockledge, Florida 32955							DO NOT WRITE IN THIS SPACE				
	carcage, ric	/11dg 32933	•		3. Date Incorporated or Qualifed 3/24/97						
2. Principal Place of Business 2a. Mailing Address 26						4.	FEI Number 59-3450785	-	Applied For Not Applicable		
Suite, Apt. #, etc. Suite, Apt. #, etc. 27							Certifcate of Status Desired	\$8.75 Additional Fee Required			
City & State			City & State				Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Ziç 24	Zip Country Zip Count 25 29 30				8. This corporation owes the current year Intangible Personal Property Tax.						
	9. Name and	Address of Current Reg		10. Name and Address of New Registered Agent							
Ma	rkey f Fowl	er D A		81 82							
Markey & Fowler, P.A. 410 West Merritt Avenue Merritt Island, Florida 32953					Street Address (P.O. Box Number is Not Acceptable)						
				84	City		F	L 85	Zip Code		
11, F	Pursuant to the provisions	of Sections 607.0502 and	607.1508, Florida Statutes, the	above	-named corp	oration	submits this statement for the purpose of	of changi	ng 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				DIT					
12.	Signature, typed or printed name of registered agent and title if applications of the printed states of the state of the s		egistered Agent signature rec 13.	Quired when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
		DELETE	1.1 TITLE	ADDITIONO/ON MODE TO ON TOLEROY.	Change	Addition			
TITLE	DP T	□ DECE IE		4 management		_			
NAME	Todd Winton		1.2 NAME	10000ູດູຊູອູດູຣຸ					
STREET ADDRESS	433 Blakey Blvd.		1.3 STREET ADDRESS	-06/15/990					
CITY-ST-ZIP	Cocoa Beach, F1 3293	1	1.4 CiTY-ST-ZIP	****150.00	****				
TITLE	DVPS	☐ DELETE	2.1 TITLE		Change	☐ Addition			
NAME	Charlene Winton		2.2 NAME						
STREET ADORESS	433 Blakey Blvd.		23 STREET ADDRESS						
CITY-ST-ZOP	Cocoa Beach, F1 3293	1	2 4 CITY-ST-ZIP						
TITLE		□ DELETE	3.1 TITLE		Change	☐ Addition			
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NAME			4.2 NAME						
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TITLE		☐ DELETE	5.1 TITLE		Change	☐ Addition			
NAME			5.2 NAME						
STREET ADDRESS			5.3 STREET ADDRESS						
CITY-ST-ZIP			54 CITY+ST-ZIP		.,				
TITLE		☐ DELETE	6.1 TITLE		Change	☐ Addition			
NAME			6.2 NAME						
STREET ADDRESS			63 STREET ADDRESS			١ ٨			
CITY-ST-7IP			6.4 CITY-ST-ZIP			. 16.19			

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 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 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 appearance is a supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I 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 appearance is a supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I 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 appearance is a supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes.

SIGNATURE: M. Charlene Winton

Law Offices MARKEY & FOWLER, P. A.

410 West Merritt Avenue Merritt Island, Florida 32953 (407) 453-0547 (Telephone) (407) 453-0958 (Facsimile)

KEVIN P. MARKEY DANIEL B. FOWLER JOSEPH R. BACHAND HILARY FRIDSHAL Mailing Address: Post Office Box 541081 Merritt Island, Florida 32954-1081

June 10, 1999

Vla federal express

Division of Corporations 409 East Gaines Street Tallahasse, FL 32399

RE:

Dobbs Rentals, Inc.

Dear Sir/Madam:

This correspondence is written for the purpose of requesting an individual review regarding the annual report for the above-referenced corporation. The corporation did not receive an annual report package from the Division of Corporations and at no time did they fail to receive any other corporate mail. This corporation has had this happen to them before and would like to request that a check in the system be made to see if they are being over looked or perhaps has the wrong address on file.

Enclosed with this correspondence is a completed annual report and a check in the amount of \$150.00. Please advise the corporation of the review as requested. Thank you for your assistance in this matter.

Sincerely,

Megan B. Martell Legal Secretary

Mean B. Martell

/mbm Enclosures