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

CORPORATION ANNUAL REPORT

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CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

**FILED** 

Mar 26 1998 8:00am

954-758-7926

## Sandra B. Mortham

Secretary of State

Secretary of State 1998 DIVISION OF CORPORATIONS P97000041159 (9) DOCUMENT # DUDLEY HOLDINGS, INC. Principal Place of Business Mailing Address RAYVAN BUILDING SUITE 300 RAYVAN BUILDING SUITE 300 3350 E ATLANTIC BLVD 3350 E ATLANTIC BLVD DO NOT WRITE IN THIS SPACE POMPANO BEACH FL 33062 POMPANO BEACH FL 33062 3, Date Incorporated or Qualified 05/08/1997 2. Principal Place of Business 2a, Mailing Address 4. FEI Number Applied For 65-0754425 Not Applicable 21 26 Suite, Apt. #, etc. Suita, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country Zip Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name WARREN, PHILIP M **RAYVAN BUILDING SUITE 300** 82 Street Address (P.O. Box Number is Not Acceptable) 3350 E ATLANTIC BLVD POMPANO BEACH FL 33062 83 64 City Zip Code 85 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, typind or printed name of registered again and title if applicable. (NOTE: Registered Agent signature required when reinstating) CRZE034 (10/97 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. PSTD DELETE Change \_\_\_ Addition TITLE 1.1 TITLE WILSON, ERIC R NAME 1.2 NAME 5033 NW 81ST TERRACE STREET ADDRESS 1.3 STREET AODRESS COFIAL SPRINGS FL 33067 CITY-\$1-ZIP 1.4 CITY+ST-ZIP DELETE TITLE 2.1 TITLE Change ■ Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP ☐ DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP ☐ Change DELETE Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE ☐ Change Addition TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** 

6.4 CITY-ST-ZIP

14. Thereby 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 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.