


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

FILED

Mar 13 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
<b>DOCUMENT #</b> P97000065647 1. Corporation Name  C & R DUJON, INC.			
Principal Place of Business 1481 Kastner Place Lake Monroe, FL 32746		Mailing Address P. O. Box 470281 Lake Monroe, FL 32747-0281	
2. Principal Place of Business 21 1481 Kastner Place Suite, Apt. #, etc. 22 City & State 23 Lake Monroe, FL 24 Zip 32746 25 Country		2a. Mailing Address 26 P.O. Box 470281 Suite, Apt. #, etc. 27 City & State 28 Lake Monroe, FL 29 32747-0281 30 Seminole	
3. Date Incorporated or Qualified July 28, 1997		3a. Date of Last Report	
4. FEI Number 59-3458881		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
9. Name and Address of Current Registered Agent  RICHARD G. DUJON 1481 Kastner Place Lake Monroe, FL 32746		10. Name and Address of New Registered Agent 81 Name CAROLYN S. DUJON 82 Street Address (P.O. Box Number is Not Acceptable) 1481 Kastner Place 83 84 City Lake Monroe FL 85 Zip Code 32746	
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 <i>Carolyn S. Dujon</i> DATE 3/09/98 <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE P/D <input type="checkbox"/> DELETE NAME DUJON, CAROLYN S. STREET ADDRESS 1481 Kastner Place CITY-ST-ZIP Lake Monroe, FL 32746		11 TITLE S <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 12 NAME DUJON, CAROLYN S. 13 STREET ADDRESS 1481 Kastner Place 14 CITY-ST-ZIP Lake Monroe, FL 32746	
TITLE VP/D <input checked="" type="checkbox"/> DELETE NAME DUJON, RICHARD G. STREET ADDRESS 1481 Kastner Place CITY-ST-ZIP Lake Monroe, FL 32746		21 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP	
TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-ST-ZIP		31 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP	
TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-ST-ZIP		41 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP	
TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-ST-ZIP		51 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP	
TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-ST-ZIP		61 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP	
14. I do 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 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.		600002456876 -03/13/98--01057--014 ***150.00	
SIGNATURE: <i>Carolyn S. Dujon</i>		3/09/98 323-0990	

CRPF034 (9/96)