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

**PROFIT** CORPORATION ANNUAL REPORT

1998



## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P97000069275 (0) DOCUMENT #

## **FILED** Feb 12 1998 8:00am Secretary of State

DENNIS	S WRIGHT, INC.								
Principal Place	of Business	Mailing Address		·	$\neg\neg$	S HERITARI TIR LEKK DÖRIT EDITI BETIT E	OLU BOUR DHAD I	inija ilnii ipi	TAT BUIL IAAk
3839 WIGGINTON RD 3839 WIGGINTON RD								:	
TALLAHASSEE FL 32303 TALLAHASSEE FL 323						DO NOT WRITI		PACE	
						3. Date incorporated or Qualified 08/11/1997			
2. Principal Pl	ace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number		Ar	oplied For
21		26				57-3968090			ot Applicable
Suite, Apt #, etc		Suite, Apt #, etc.	· 1			5. Certificate of Status Desired			Additional equired
City & Stato		City & State	<b>i</b> η '			6. Election Campaign Financing	П		May Be
<b>23</b> Zip	Country	<b>28</b> ] - Ζιρ	Countr	у		Trust Fund Contribution  8. This corporation owes or has p			to Fees tangible
24	25	29	30			Personal Property Tax due Juni			No
	g, Name and Address of Curre	nt Registered Agent				10. Name and Address of New R	egistered A	gent	
	UGDAHL, ERIC J		81	l Nam	e		-		
922 E LAFAYETTE ST, SUITE F TALLAHASSEE FL 32301			82	Stree	et Addres	s (P.O. Box Number is Not Accepta	ıble)		
· · · ·			83	3				+	
			84	City			FL	<b>85</b> Zip	Code
11. Pursuant office or reagent. I as	o the provisions of Sections 607.056 egistered agent, or both, in the State in familiar with, and accept the oblig	02 and 607,1508, Florida Statute e of Florida, Such change was au jations of, Section 607,0505, Flor	s, the about thorized b ida Statute	ve-name by the co os.	ed corporation	ation submits this statement for the i's board of directors. I hereby acce	. –	:hanging it intment as	ts registered registered
SIGNATURE	Signature, typed or printed name of rigistered my	MOTE that the dames while (NOTE	Registered Ac	nont signati	ure required i	when reinstating)	DATE	<del></del>	
12.		ID DIRI CTORS	13.			ADDITIONS/CHANGES TO OFFI		DIRECTOR	RS IN 12
TITLE	D	DELETE	1.1 TITLE					Change	Addition
NAME	WRIGHT, DENNIS								
STREET ADDRESS	3839 WIGGINTON RD		1.3 STREE	1.3 STREET ADDRESS					
CITY-ST-ZIP	TALLAHASSEE FL 32303		1.4 CITY-	ST-ZIP				i	
TITLE	☐ DLLETE 2.		2.1 TITLE	2.1 TITLE			L	Change	■ Addition
NAME			2.2 NAME	2.2 NAME				!	
STREET ADDRESS	l		2.3 STREE	2.3 STREET ADDRESS					
CITY-ST-ZIP			2 4 CITY-ST-ZIP				——— <sub>—</sub>	Ohanas	Addition
TITLE	■		3 1 TITLE	ľ			L	Change	☐ Addition
NAME OTHERS ANDRESS			3.2 NAME		.			İ	
STREET ADDRESS			3.4. CITY	T ADDRESS	³				Ï
CITY-ST-ZIP TITLE	* · · · · · · · · · · · · · · · · · · ·		4.1 TITLE		<del></del>		I	Change	Addition
NAME		_	4. 2 NAME				_	- 1	
STREET ADDRESS				T ADDRESS	s				
CITY-ST-ZIP			4.4 CITY-		1				
TITLE .			51 TITLE		T			Change	Addition
NAME			52 NAME						
STREET ADDAESS			5.3 STREE	T ADDRESS	s				
CITY-ST-ZIF			54 CITY-		<b></b> _			<b>-</b>	T 7
TITLE		DELETE	61 TITLE		ĺ		L	Change	☐ Addition
NAME			6.2 NAME						
STREET ADDRESS				T ADDRESS	s				
CITY-ST-ZIP			6.4 CITY-	ST-ZIP					

plied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information principle and report is true and accurate and that my signature shall have the same legal effect as if made under cath, that I am an interactive or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in an allocation that has address

9 February 1998