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FILED

Apr 30 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P97000108255 (5)

1. Corporation Name

D & E ENTERPRISES OF ALLIGATOR POINT, INC.



Principal Place of Business

525 POPE ROAD  
ST AUGUSTINE FL 32084

Mailing Address

525 POPE ROAD  
ST AUGUSTINE FL 32084

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/24/1997

2. Principal Place of Business

21 1320 Alligator DR

Suite, Apt. #, etc.

22

City & State  
Alligator Point FL

Zip  
32346

Country

2a. Mailing Address

26 1320 Alligator Drive

Suite, Apt. #, etc.

27

City & State  
Alligator Point FL

Zip  
32346

Country

4. FEI Number

59-3485830

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

SMITH, ELLIOTT C  
525 POPE ROAD  
ST AUGUSTINE FL 32084

10. Name and Address of New Registered Agent

81 Name  
ELLIOTT C SMITH  
82 Street Address (P.O. Box Number is Not Acceptable)  
1320 Alligator Drive  
83  
84 City  
Alligator Point FL 85 Zip Code  
32346

11. Pursuant to the provisions of Sections 607.0502 and 607.0503, 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 607.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4/20/98

12. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
STD  
SMITH, ELLIOTT C  
525 POPE ROAD  
ST AUGUSTINE FL 32084 ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PD  
SMITH, DIANE D  
525 POPE ROAD  
ST AUGUSTINE FL 32084 ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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 information indicated on this annual report or supplement to 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 predecessor or successors 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 addition or change in address.

SIGNATURE

*[Signature]*

2/4/98

904  
471-3113

CR2E034 (10/97)