

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 23, 2004 8:00 am
Secretary of State

02-23-2004 90062 027 ***150.00

DOCUMENT # P98000097111

1. Entity Name

D.J.H. VENTURES, INC.



Principal Place of Business

6684 EASTON DR.
SARASOTA FL 34238

Mailing Address

6684 EASTON DR.
SARASOTA FL 34239

2. Principal Place of Business

3774 Beneva Oaks Blvd.

3. Mailing Address

3774 Beneva Oaks Blvd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Sarasota, Florida

City & State

Sarasota, Florida

Zip

34238

Country

U.S.A.

Zip

34238

Country

U.S.A.

6. Name and Address of Current Registered Agent

VOIGT, STEPHEN F P.A.
2414 BEE RIDGE RD.
SARASOTA FL 34239

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PT ☐ Delete
NAME HERING, DEBRA
STREET ADDRESS 6684 EASTON DRIVE
CITY-ST-ZIP SARASOTA FL 34238

TITLE VPS ☐ Delete
NAME HERING, DEBRA J
STREET ADDRESS 6684 EASTON DR
CITY-ST-ZIP SARASOTA FL 34238

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 3774 Beneva Oaks Blvd.
CITY-ST-ZIP Sarasota, FL 34238

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 3774 Beneva Oaks Blvd.
CITY-ST-ZIP Sarasota, FL 34238

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Debra J. Hering DEBRA J. HERING

Date

Daytime Phone #

(941)

2/11/04 921-1137