


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

FILED

Apr 29 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997				FLORIDA DEPARTMENT OF STATE Sandra B. Moynihan Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # S 65180					
1. Corporation Name Dill & Son's Tile Cont. Inc.					
Principal Place of Business 1051 Dill Ct. MARCO ISLAND, FL. 34145			Mailing Address		
2. Principal Place of Business 21 1051 Dill Ct.		2a. Mailing Address 26		3. Date Incorporated or Qualified 7-10-91	
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		3a. Date of Last Report 6-1-96	
23 City & State MARCO ISLAND		28 City & State		4. FEI Number 65-0275325	
24 Zip 34145		29 Country COLLIER		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
25 Country COLLIER		30		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 type="checkbox"/> Yes <input type="checkbox"/> No					
9. Name and Address of Current Registered Agent Hope Dill 1051 Dill Ct. MARCO ISLAND, FL. 34145			10. Name and Address of New Registered Agent		
			81 Name		
			82 Street Address (P.O. Box Number is Not Acceptable)		
			83		
			84 City 85 Zip Code FL		
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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____					
12. OFFICERS AND DIRECTORS					
1.1 TITLE <input type="checkbox"/> DELETE 1.2 NAME <input type="checkbox"/> Change <input type="checkbox"/> Addition 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP					
President DENNIS W. DILL 1031 VALLEY AVE MARCO ISLAND FL - 34145					
2.1 TITLE <input type="checkbox"/> DELETE 2.2 NAME <input type="checkbox"/> Change <input type="checkbox"/> Addition 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP					
Hope Dill V.PRES. 1051 Dill Ct. MARCO ISLAND, FL - 34145					
3.1 TITLE <input type="checkbox"/> DELETE 3.2 NAME <input type="checkbox"/> Change <input type="checkbox"/> Addition 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP					
TREASURER WILLIAM K. DILL 1051 Dill Ct. MARCO ISLAND, FL. 34145					
4.1 TITLE <input type="checkbox"/> DELETE 4.2 NAME <input type="checkbox"/> Change <input type="checkbox"/> Addition 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP					
5.1 TITLE <input type="checkbox"/> DELETE 5.2 NAME <input type="checkbox"/> Change <input type="checkbox"/> Addition 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP					
6.1 TITLE <input type="checkbox"/> DELETE 6.2 NAME <input type="checkbox"/> Change <input type="checkbox"/> Addition 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP					
700002160987 -05/01/97--01004--002 ***165.00					
14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on Block 12 or Block 13 if changed, or on an attachment with an address.					
SIGNATURE: Hope Dill 4-25-97			394-0339		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		

CR2E034 (9/96)