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FILED

Feb 07 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # S68766

(2)

1. Corporation Name

DECKERS DOUBLES, INC.

Principal Place of Business

1102 D FREEPORT ROAD  
DEFUNIAK SPRINGS FL 32433  
US

Mailing Address

15 SHELL AVENUE S.E.  
FT. WALTON BEACH FL 32548-5432

3. Date Incorporated or Qualified

07/22/1991

3a. Date of Last Report

05/01/1996

4. FEI Number

59-3076767

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional  
Fee Required

6. Election Campaign Financing

Trust Fund Contribution



\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes



Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

SEXTON, JAMES  
15 SHELL AVE., SE  
FORT WALTON BEACH FL 32548

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

(Signature of current registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

D  
SEXTON, JAMES  
15 SHELL AVENUE S.E.  
FT. WALTON BEACH FL 32548

1.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

D  
SEXTON, CAROLYN  
15 SHELL AVENUE S.E.  
FT. WALTON BEACH FL 32548

1.2 NAME ☐ Change ☐ Addition

TITLE ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

1.3 STREET ADDRESS ☐ Change ☐ Addition

TITLE ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

1.4 CITY- ST- ZIP ☐ Change ☐ Addition

TITLE ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

2.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

2.2 NAME ☐ Change ☐ Addition

TITLE ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

2.3 STREET ADDRESS ☐ Change ☐ Addition

TITLE ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

2.4 CITY- ST- ZIP ☐ Change ☐ Addition

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 included 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.

SIGNATURE:

*James Sexton*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

James Sexton 2-3-97 904-243-2525  
Date Daytime Phone #

CR2E034 (9/96)