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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 01 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # \$72539

(7)

DANIEL M. DENNIS INC.

SIGNATURE:

Principal Place of Business Malling Address  1024 10TH LN PALM BEACH GARDENS FL 33418 PALM BEACH GAR			NS FL 33418-357				
'					3. Date Incorporated or Qualified 08/07/1991	, and the second	
2. Principal Pla	ce of Business	2a, Mailing Address	······································		4, FEI Number		Applied For
21		26	Cylin Ant H ata		65-0285844		Not Applicable
Suite, Apt #	, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		5 Additional Required
City & State		City & State	City & State		Election Campaign Financing     Trust Fund Contribution		00 May Be ed to Fees
Zip <b>24</b>	Country 25	Z(p	Zip Country		8. This corporation has liability for intengible tax under s. 199.032, Florida Statutes Yes No		
	9. Name and Address of Cur-				10. Name and Address of New Ro	egistered Agent	
DENI	NIS, DANIEL M.		81	Name			
1024 10TH LN PALM BEACH GARDENS FL 33418				Street Addr	ress (P.O. Box Number is Not Accepta	ble)	
( num	, DE CIT WINDLING TE SOTT		83		······································		
			84	City		FL 85 Z	ip Code
11. Pursuant to	the provisions of Sections 607.0	502 and 607.1508, Florida St	atutes, the abov	e-named corp	poration submits this statement for the		g its registered
office or re- agent. I an	gistered agent, or both, in the Sta familiar with, and accept the ob	ite of Florida. Such change w ligations of, Section 607.0505	ras authorized by i. Florida Statute	the corporat	poration submits this statement for the tion's board of directors. I hereby acce	pt the appointment	as registered
SIGNATURE	, , , ,		•				Ĭ
s	igrature typed or printed name of registered		(NOTE: Registered Ag	ent signature requi		DATE	
12.	D OFFICERS /	AND DIRECTORS  DELETE	13. 1.1 TULE	<del></del>	ADDITIONS/CHANGES TO OFF	CERS AND DIRECT	
NAME	DENNIS, DANIEL M.	L occent	1.2 NAME			V.6.1	, Indiana
STREET ADDRESS	1024 10TH LN			ADDRESS			
CITY-ST-ZIP	PALM BCH GARDENS FL		1.4 CITY-1				
TOLE		DELETE				☐ Chang	ge 🔲 Addition
NAME			2.2 NAME				1
STREET ADDRESS			2.3 STREET	ADDRESS			
CITY-SI-ZIP			2.4 CITY-	ST-ZIP			
TIFLE		DELETE				□ Chang	ge 🔲 Addition
NAME DISCLADOR OF			3.2 NAME				
STREET ADDRESS			3.3 STREE 3.4. CITY-	ADORESS			
CITY-ST-ZIP TITLE		DELETE	4.1 TITLE	51-211		Chang	ge Addition
NAME		<del></del>	4 2 NAME	-			
STREET ADDRESS				ADDRESS	•		
CITY - ST - ZIP			4.4 CITY-1	ST-ZIP			-
TUTLE		DELETE	5.1 TITLE			☐ Chang	ge Addition
NAME			5.2 NAME				
STREET ADDRESS			53 STREE	ADDRESS			1
CITY-ST-ZIP			5.4 CITY-	ST-ZIP		T A.	
TITLE		DELETE				Chang	ge 🔲 Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREE	ADDRESS			

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 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 eath; that I am an officer or director of the comporation 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.