

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **S86591** (2)

1. Corporation Name
D.Y.S., INC.



Principal Place of Business

~~600 17TH STREET~~ **1815 PELICAN WAY**
~~3S~~
~~VERO BEACH FL 32900~~
US 32963

Mailing Address

~~PO BOX 1181~~ **1815 PELICAN WAY**
~~VERO BEACH FL 32964~~
US 32963

3. Date Incorporated or Qualified
10/10/1991

3a. Date of Last Report
07/11/1995

2. Principal Place of Business

21 **1815 PELICAN WAY**

Suite, Apt. #, etc.
22 **VERO BEACH**

City & State
23 **FL**

Zip Country
24 **32963** 25 **US**

2a. Mailing Address

26 **1815 PELICAN WAY**

Suite, Apt. #, etc.

City & State
27 **VERO BEACH, FL**

Zip Country
28 **32963** 29 **US**

4. FEI Number

65-0299798

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CUNNINGHAM, CHARLES E.

~~500 N.W. PEACOCK BLVD~~

~~PORT ST LUCIE FL 34986~~

1815 PELICAN WAY
VERO BEACH
FL
32963

81 Name **CUNNINGHAM, CHARLES E.**

82 Street Address (P.O. Box Number is Not Acceptable) **1815 PELICAN WAY**

83 **VERO BEACH**

84 City **FL** 85 Zip Code **32963**

11. Pursuant to the provisions of Sections 607.0509 and 607.1509, 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 *Charles E. Cunningham*

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

(NOTE: Registered Agent signature required when reappointing)

5/15/96

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME **CUNNINGHAM, CHARLES E.**
STREET ADDRESS ~~500 N.W. PEACOCK BLVD #3~~ **1815 PELICAN WAY**
CITY-ST-ZIP ~~PORT ST LUCIE FL~~ **VERO BEACH**

TITLE ☐ DELETE
NAME **ESSAYE, TIMOTHY**
STREET ADDRESS **3339 CARDINAL DR.**
CITY-ST-ZIP **VERO BEACH FL**

TITLE ☐ DELETE
NAME **PETERSON, DONALD**
STREET ADDRESS **1516 SMUGGLES COVE**
CITY-ST-ZIP **VERO BEACH FL**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

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

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

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

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

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

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 in Block 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE: *Charles E. Cunningham*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/15/96 (56-234-0219)

CR2E034 (12/95)