

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

REGISTRATION
ANNUAL REPORT
1995



DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
CORPORATION REPORT

APPROVED
AND
FILED

DOCUMENT # V18278

(4)

MAY 11 11:22

THE
TREASURER OF THE
STATE OF FLORIDA

DINETTE SHOWCASE AND MORE, INC.

3506 N PALAFOX ST
PENSACOLA FL 32503

3506 N PALAFOX ST
PENSACOLA FL 32503

DATE OF FILING

3. Filing Date of this report	03/03/1992	3a. Filing Date of Report	05/01/1994
4. Filing Number	59-3110213	Applied For	Not Applicable
5. Certificate of Status Entered	☐	\$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 unpaid taxes under the 1990, 1991, Florida Statutes	☐ Yes ☒ No		

2. Principal Office Address	2a. Mailing Address
21. 800 Beverly Parkway	26. P.O. Box 6386
22. City	27. State
23. Pensacola FL	28. Pensacola FL
24. 32505	25. Escambia
29. 32503	30. FL

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RHEA, WILLIAM H.
5506 N PALAFOX ST
PENSACOLA FL 32503

01. Name	
02. Street Address (P.O. Box Number is Not Acceptable)	
03. City	
04. State	FL
05. Zip Code	

11. Pursuant to the provisions of Sections 607.05(1) and 607.05(2) of the Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office to the address set forth in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept this appointment as registered agent. I am familiar with and accept the provisions of Chapter 607 of the Florida Statutes.

SIGNATURE

Signature of the person who is to be registered agent of the corporation. If the corporation is a partnership, the signature of the partner who is to be registered agent of the corporation.

12. OFFICERS AND DIRECTORS	13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS
1. NAME D RHEA, WILLIAM H. 5506 N PALAFOX ST PENSACOLA FL	1. NAME ☐ Change ☐ Addition
2. NAME D RHEA, DEBBIE J. 5506 N PALAFOX ST PENSACOLA FL	2. NAME ☐ Change ☐ Addition
3. NAME	3. NAME ☐ Change ☐ Addition
4. NAME	4. NAME ☐ Change ☐ Addition
5. NAME	5. NAME ☐ Change ☐ Addition
6. NAME	6. NAME ☐ Change ☐ Addition
7. NAME	7. NAME ☐ Change ☐ Addition
8. NAME	8. NAME ☐ Change ☐ Addition
9. NAME	9. NAME ☐ Change ☐ Addition
10. NAME	10. NAME ☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing is a true and correct statement of the facts and is not a fraud or a violation of the provisions of the Florida Statutes. I am familiar with and accept the provisions of Chapter 607 of the Florida Statutes, and that my name appears on the list of registered agents in the State of Florida.

SIGNATURE:

SIGNATURE AND TITLE OF REGISTERED AGENT OR DIRECTOR

4/28/95

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