

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **V42418**

(6)

1. Corporation Name

DENNIS MACHINE COMPANY, INC.



Principal Place of Business

**6618 GEORGIA AVENUE
WEST PALM BEACH FL 33405**

Mailing Address

**6618 GEORGIA AVENUE
WEST PALM BEACH FL 33405**

3. Date Incorporated or Qualified
06/08/1992

3a. Date of Last Report
09/13/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number
65-0340273

Applied For
Not Applicable

State, Apt. #, etc.

State, Apt. #, etc.

22

27

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

City & State

City & State

23

28

6. Election Campaign Financing
Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

Zip

Country

Zip

Country

24

25

29

30

8. This corporation has liability for intangible tax under s. 190.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**DENNIS, HAROLD
6104 FAIRFIELD CIRCLE
LAKE WORTH FL 33463-3051**

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 607.0602 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 607.0605, Florida Statutes.

SIGNATURE

Signature typed or printed name of officer or director

Signature of Registered Agent required when registering

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PD**
NAME **DENNIS, HAROLD**
STREET ADDRESS **6104 FAIRFIELD CIRCLE**
CITY, ST, ZIP **LAKE WORTH FL 33463**

☐ DELETE

TITLE **SD**
NAME **DENNIS, DORIS C**
STREET ADDRESS **6104 FAIRFIELD CIRCLE**
CITY, ST, ZIP **LAKE WORTH FL 33463-3051**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

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CITY, ST, ZIP

☐ DELETE

14. I 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 on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/12/96

407-500-7521

CR2E034 (12/95)