

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 MAY -1 AM 3:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # V58843 (6)

1. Corporation Name

ACCUCHECK, INC.

DO NOT WRITE IN THIS SPACE.

Principal Place of Business
**221 CEDARWOOD CT
DEBARY FL 32713
US**

Mailing Address
**221 CEDARWOOD CT
DEBARY FL 32713
US**

3. Date Incorporated or Qualified
08/17/1992

3a. Date of Last Report
07/19/1994

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

28 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29

30

4. FEI Number
59-3139327

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**

7. This corporation has liability for intangible tax under S. 189.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

**DYKES, TOM J., IV
218 CADDIE CT
DEBARY FL 32713**

10. Name and Address of New Registered Agent

81 Name
DYKES, TOM J., IV

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

83

84 City
DEBARY

85 Zip Code
FL 32713

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

Thomas J. Dykes **THOMAS J. DYKES**

4-26-95

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
D	DYKES, TOM J., IV	221 CEDARWOOD CT	DEBARY FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	Change	Addition
PRESIDENT	DYKES, TOM J., IV	221 CEDARWOOD CT.	DEBARY, FL. 32713	☒	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐

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 110.07(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

Thomas J. Dykes **THOMAS J. DYKES**

Date

4-26-95

Daytime Phone #

407 664 2425