

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

**APPROVED
AND
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95 MAY - 1 PM 3:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Carolee B. Murphree
Secretary of State
Division of Corporations

DOCUMENT # **V63782** (9)

H & D RESTAURANTS, INC.

Principal Place of Business: **1520 SOUTH NOVA ROAD DAYTONA BEACH FL 32114**
Mailing Address: **1520 SOUTH NOVA ROAD DAYTONA BEACH FL 32114**

2. Principal Place of Business: **21** State: **FL** City: **Daytona Beach** County: **Wayne**
2b. Mailing Address: **26** State: **FL** City: **Daytona Beach** County: **Wayne**

3. Date incorporated / qualified: **09/08/1992** 3a. Date of Last Report: **06/09/1994**
4. FEI Number: **59-3143842** Assessed For: **Not Applicable**
5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
6. Election Campaign Financing: **\$5.00 May Be Added to Fees**
7. The corporation has liability for intangible tax under § 199.039 Florida Statutes: Yes No

9. Name and Address of Current Registered Agent:
**DOUGLAS, DANIEL R
1520 SOUTH NOVA ROAD
DAYTONA BEACH FL 32114**

10. Name and Address of New Registered Agent:
81 Name:
82 Street Address (P.O. Box Number is Not Acceptable):
83 City:
84 State: **FL** **85 Zip Code:**

11. Pursuant to the provisions of Sections 607.0802 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, through its appointment as registered agent, to amend both and accept the obligations of Section 607.0828, Florida Statutes.

SIGNATURE: _____

12. OFFICERS AND DIRECTORS

12.1	NAME: PSD DOUGLAS, DANIEL R STREET ADDRESS: 2846 JULIET DRIVE DELTONA FL 32738 CITY: DELTONA FL
12.2	NAME: VTD DOUGLAS, DANIEL R STREET ADDRESS: 2846 JULIET DRIVE DELTONA FL CITY: DELTONA FL
12.3	NAME: _____ STREET ADDRESS: _____ CITY: _____
12.4	NAME: _____ STREET ADDRESS: _____ CITY: _____
12.5	NAME: _____ STREET ADDRESS: _____ CITY: _____
12.6	NAME: _____ STREET ADDRESS: _____ CITY: _____

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS ONLY

13.1	NAME: PEB DOUGLAS, DANIEL R STREET ADDRESS: 2947 GASLIGHT DR SOUTH DAYTONA BCH FL 32119 CITY: SOUTH DAYTONA BCH FL 32119 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
13.2	NAME: VTD DOUGLAS, DANIEL R STREET ADDRESS: 2947 GASLIGHT DR SOUTH DAYTONA BCH FL 32119 CITY: SOUTH DAYTONA BCH FL 32119 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
13.3	NAME: _____ STREET ADDRESS: _____ CITY: _____ <input type="checkbox"/> Change <input type="checkbox"/> Addition
13.4	NAME: _____ STREET ADDRESS: _____ CITY: _____ <input type="checkbox"/> Change <input type="checkbox"/> Addition
13.5	NAME: _____ STREET ADDRESS: _____ CITY: _____ <input type="checkbox"/> Change <input type="checkbox"/> Addition
13.6	NAME: _____ STREET ADDRESS: _____ CITY: _____ <input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.011(1)(b), Florida Statutes. I further certify that the information included 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 this corporation or trustee or partner or proprietor of any other firm reported on in this report as required by Chapter 607, Florida Statutes, and that my name appears on the list of filers to be changed or on an alternate list with an address.

SIGNATURE: *Daniel R Douglas* **DANIEL R DOUGLAS** 5-1-95 9011-252-8400
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR