

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **V73360**

(2)

1. Corporation Name

DALZIEL SUPPLY WORLD, INC.



Principal Place of Business

Mailing Address

**920 EAST CARROLL STREET
KISSIMMEE FL 34744
US**

**920 EAST CARROLL STREET
KISSIMMEE FL 34744
US**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 **SAME**
Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25

29 30

3. Date Incorporated or Qualified

10/19/1992

3a. Date of Last Report

05/01/1995

4. FEI Number

59-3149478

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

**WAKEFIELD, S. CRAIG
1400 WEST OAK ST.
SUITE A
KISSIMMEE FL 34741**

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 607.0502 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

(Signature of person authorized to register the corporation)

(Signature of Registered Agent, required when a new agent is appointed)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

11.1 TITLE

11.2 NAME

11.3 STREET ADDRESS

11.4 CITY-ST-ZIP

**D
DALZIEL, STEPHEN F.
5126 ST. GERMAIN
ORLANDO FL**

☐ DELETE

11.1 TITLE

11.2 NAME

11.3 STREET ADDRESS

11.4 CITY-ST-ZIP

**V
DALZIER, WILLIAM S
2030 OLIVEWOOD COURT
KISSIMMEE FL**

☐ DELETE

11.1 TITLE

11.2 NAME

11.3 STREET ADDRESS

11.4 CITY-ST-ZIP

**ST
DALZIER, BEVERLY J
203 OLIVEWOOD CT
KISSIMMEE FL 34743**

☐ DELETE

11.1 TITLE

11.2 NAME

11.3 STREET ADDRESS

11.4 CITY-ST-ZIP

☐ DELETE

11.1 TITLE

11.2 NAME

11.3 STREET ADDRESS

11.4 CITY-ST-ZIP

☐ DELETE

11.1 TITLE

11.2 NAME

11.3 STREET ADDRESS

11.4 CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change

☐ Addition

13.1 TITLE

13.2 NAME

13.3 STREET ADDRESS

13.4 CITY-ST-ZIP

**V
DALZIEL, William S
2030 OLIVEWOOD CT.
KISSIMMEE, FL 34743**

☒ Change

☐ Addition

13.1 TITLE

13.2 NAME

13.3 STREET ADDRESS

13.4 CITY-ST-ZIP

**ST
DALZIEL, Beverly J.
203 OLIVEWOOD CT.
Kissimmee, FL 34743**

☒ Change

☐ Addition

13.1 TITLE

13.2 NAME

13.3 STREET ADDRESS

13.4 CITY-ST-ZIP

☐ Change

☐ Addition

13.1 TITLE

13.2 NAME

13.3 STREET ADDRESS

13.4 CITY-ST-ZIP

☐ Change

☐ Addition

13.1 TITLE

13.2 NAME

13.3 STREET ADDRESS

13.4 CITY-ST-ZIP

☐ Change

☐ Addition

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 on an attachment with an address.

SIGNATURE:

Beverly J. Dalziel **Beverly J. Dalziel** 1/24/96 407-847-2737

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature Block

CR2E034 (12/95)