

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 131697

Entity Name: DMCI 1935 INC.**Current Principal Place of Business:**2867 ESTES ST.
2867 ESTES ST
MARIANNA, FL 32448**Current Mailing Address:**P. O. BOX 779
MARIANNA, FL 32447 US**FEI Number:** 59-0212490**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MILTON, JOHN
4671 MEADOWVIEW RD
MARIANNA, FL 32446 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:** JOHN MILTON

05/01/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PD
Name	DAFFIN, LEE M.
Address	4671 MEADOWVIEW RD
City-State-Zip:	MARIANNA FL 32446

Title	D
Name	DAFFIN, HUNTER R JR.
Address	2766 INDIAN SPRINGS RD
City-State-Zip:	MARIANNA FL

Title	CD
Name	MILTON, JOHN W.
Address	2760 INDIAN SPRINGS RD
City-State-Zip:	MARIANNA FL

Title	D
Name	DAFFIN, SIDNEY AIII
Address	746 HARRISON AVE
City-State-Zip:	PANAMA CITY FL 32401

Title	D
Name	DAFFIN, EDGAR O
Address	230 BONITA AVE
City-State-Zip:	PANAMA CITY FL 32401

Title	VP
Name	MILTON, BRYAN D
Address	PO BOX 779
City-State-Zip:	MARIANNA FL 32447

Title	DIR
Name	MILTON, JOHN
Address	2764 INDIAN SPRINGS RD
City-State-Zip:	MARIANNA FL 32446

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: JOHN MILTON

X

05/01/2017

Electronic Signature of Signing Officer/Director Detail

Date