

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# H90183

**Entity Name:** DALLAS 1 CORPORATION**Current Principal Place of Business:**10328 MAIN ST  
THONOTOSASSA, FL 33592**Current Mailing Address:**PO BOX 249  
THONOTOSASSA, FL 33592 US**FEI Number:** 59-2610376**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**AZZARELLI, BARTLE III  
10328 MAIN STREET  
THONOTOSASSA, FL 33592 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:** BARTLE AZZARELLI, III

05/04/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SEC  
Name AZZARELLI, JAN  
Address PO BOX 249  
City-State-Zip: THONOTOSASSA FL 33592

Title CEO  
Name AZZARELLI, BARTLE JJR  
Address PO BOX 249  
City-State-Zip: THONOTOSASSA FL 33592

Title CHIEF MINISTRY OFFICER  
Name MARTIN, SHAWN  
Address PO BOX 249  
City-State-Zip: THONOTOSASSA FL 33592

Title VP  
Name SMITH, TIMOTHY  
Address PO BOX 249  
City-State-Zip: THONOTOSASSA FL 33592

Title PRESIDENT  
Name AZARRELLI, BARTLE III  
Address PO BOX 249  
City-State-Zip: THONOTOSASSA FL 33592

Title COO  
Name BENNETT, ROBB  
Address PO BOX 249  
City-State-Zip: THONOTOSASSA FL 33592

Title CFO  
Name BOYD, JAMES  
Address PO BOX 249  
City-State-Zip: THONOTOSASSA FL 33592

Title ASSISTANT VICE-PRESIDENT -  
CONTRACT ADMINISTRATOR/EEOC  
OFFICER  
Name WILEY, SHIRLEY  
Address PO BOX 249  
City-State-Zip: THONOTOSASSA FL 33592

**Continues on page 2**

*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:** JAMES W BOYD

CFO

05/04/2020

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title	CHIEF ESTIMATOR
Name	JUSTICE, ISRAEL
Address	PO BOX 249
City-State-Zip:	THONOTOSASSA FL 33592