

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **P92000011212 (7)**

1. Corporation Name  
**DUNRAVEN CORPORATION**



Principal Place of Business: **118 CHANDLER LANE, CENTERVILLE DE 19807, US**  
Mailing Address: **118 CHANDLER LANE, CENTERVILLE DE 19807, US**

3. Date Incorporated or Qualified: **12/11/1992**  
3a. Date of Last Report: **03/20/1995**  
4. FEI Number: **65-0385086**  
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

2. Principal Place of Business: **21** State, Apt. #, etc.: **22** City & State: **23** Zip: **24** Country: **25**  
2a. Mailing Address: **26** State, Apt. #, etc.: **27** City & State: **28** Zip: **29** Country: **30**

9. Name and Address of Current Registered Agent

**CLARK, THOMAS W  
7979 S TAMiami TRAIL, UNIT A  
SARASOTA FL 34231**

10. Name and Address of New Registered Agent

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 607.0642 and 607.1506, 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Sections 607.0642, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

|                      |                                     |                                 |
|----------------------|-------------------------------------|---------------------------------|
| 12.1 TITLE           | <b>DP</b>                           | <input type="checkbox"/> DELETE |
| 12.2 NAME            | <b>CLARK, THOMAS W</b>              |                                 |
| 12.3 STREET ADDRESS  | <b>7979 S TAMiami TRAIL, UNIT A</b> |                                 |
| 12.4 CITY, ST, ZIP   | <b>SARASOTA FL</b>                  |                                 |
| 12.5 TITLE           | <b>DST</b>                          | <input type="checkbox"/> DELETE |
| 12.6 NAME            | <b>CLARK, LUCILLE G</b>             |                                 |
| 12.7 STREET ADDRESS  | <b>7979 S TAMiami TRAIL, UNIT A</b> |                                 |
| 12.8 CITY, ST, ZIP   | <b>SARASOTA FL</b>                  |                                 |
| 12.9 TITLE           | <b>DP</b>                           | <input type="checkbox"/> DELETE |
| 12.10 NAME           | <b>DONALD T. CLARK</b>              |                                 |
| 12.11 STREET ADDRESS |                                     |                                 |
| 12.12 CITY, ST, ZIP  |                                     |                                 |
| 12.13 TITLE          |                                     | <input type="checkbox"/> DELETE |
| 12.14 NAME           |                                     |                                 |
| 12.15 STREET ADDRESS |                                     |                                 |
| 12.16 CITY, ST, ZIP  |                                     |                                 |
| 12.17 TITLE          |                                     | <input type="checkbox"/> DELETE |
| 12.18 NAME           |                                     |                                 |
| 12.19 STREET ADDRESS |                                     |                                 |
| 12.20 CITY, ST, ZIP  |                                     |                                 |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: 12

|                      |   |  |
|----------------------|---|--|
| 13.1 TITLE           | <b>D</b>  | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 13.2 NAME            |   |  |
| 13.3 STREET ADDRESS  |   |  |
| 13.4 CITY, ST, ZIP   |   |  |
| 13.5 TITLE           | <b>D</b>  | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 13.6 NAME            |   |  |
| 13.7 STREET ADDRESS  | <b>DP</b>   | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 13.8 CITY, ST, ZIP   | <b>CLARK, DONALD T.<br/>118 CHANDLER LN.<br/>CENTREVILLE, DE 19807</b>  |  |
| 13.9 TITLE           | <b>DST</b>  | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 13.10 NAME           |   |  |
| 13.11 STREET ADDRESS | <b>CLARK, MELISSA C.<br/>118 CHANDLER LN.<br/>CENTREVILLE, DE 19807</b> |  |
| 13.12 CITY, ST, ZIP  |   |  |
| 13.13 TITLE          |   | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| 13.14 NAME           |   |  |
| 13.15 STREET ADDRESS |   |  |
| 13.16 CITY, ST, ZIP  |   |  |
| 13.17 TITLE          |   | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| 13.18 NAME           |   |  |
| 13.19 STREET ADDRESS |   |  |
| 13.20 CITY, ST, ZIP  |   |  |

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, 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 addition next with an address.

SIGNATURE: *Donald T. Clark* (DONALD T. CLARK) 2/7/96 303-652-4459  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)