FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

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

APPROVED
AND
FILED

95 MAY -1 PM 1:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **F83417** **(8)**

1. Corporate Name

FISCHER-INTERNATIONAL SYSTEMS CORPORATION

Principal Place of Business	Mailing Address
4073 MERCHANTILE AVENUE PO BOX 9107 NAPLES FL 33942	4073 MERCHANTILE AVENUE PO BOX 9107 NAPLES FL 33942

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **06/01/1982**
3a. Date of Last Report: **08/01/1994**

2. Principal Place of Business — 21
2a. Mailing Address — 26
State, Apt. # or P.O. — 22 / 27
City & State — 23 / 28
Zip — 24 / 25 / 29 / 30

4. FEI Number: **59-2231919** ☐ 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. The corporation has largely for intangible tax under § 199.032, Florida Statutes. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
ASHLEY, N. REX 1044 CASTELLO DR. SUITE 106 NAPLES FL 33940	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 Section 607.0505 and 607.1505, 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 I accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN '95	
01	DP	01	☐ Change ☐ Addition
NAME	FISCHER, ADDISON M.	02 NAME	
STREET ADDRESS	20-14TH AVENUE SOUTH	03 STREET ADDRESS	
CITY ST ZIP	NAPLES FL	04 CITY ST ZIP	
02	S	05	☐ Change ☐ Addition
NAME	ASHLEY, N. REX	06 NAME	
STREET ADDRESS	1044 CASTELLO DR., STE. 106	07 STREET ADDRESS	
CITY ST ZIP	NAPLES FL	08 CITY ST ZIP	
03		09	☐ Change ☐ Addition
NAME		10 NAME	
STREET ADDRESS		11 STREET ADDRESS	
CITY ST ZIP		12 CITY ST ZIP	
04		13	☐ Change ☐ Addition
NAME		14 NAME	
STREET ADDRESS		15 STREET ADDRESS	
CITY ST ZIP		16 CITY ST ZIP	
05		17	☐ Change ☐ Addition
NAME		18 NAME	
STREET ADDRESS		19 STREET ADDRESS	
CITY ST ZIP		20 CITY ST ZIP	
06		21	☐ Change ☐ Addition
NAME		22 NAME	
STREET ADDRESS		23 STREET ADDRESS	
CITY ST ZIP		24 CITY ST ZIP	

14. I declare under oath that the information supplied with this report is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further state 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 above or on an attachment with an address.

SIGNATURE: ✓ Alex Ashley Alex Ashley 4/24/95

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Telephone Number

0327020 CP