## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998

.

A STATE OF



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9500004598 (7)

COMPUTER SYSTEM RESOLUTIONS CORP.

Principal Place of Business 6900-29 DANIELS PKWY

Mailing Address

FILED Feb 02 1998 8:00am Secretary of State



1/25/98

6900-29 DANII FORT MYERS	FL 33912	6900-29 DANIELS PKWY SUITE 227 FORT MYERS FL 33912 US		DO NOT WRITE IN THIS  3. Date Incorporated or Qualified  09/21/1995	
	lace of Business	2a. Mailing Address		4. FEI Number 58-1751518	Applied For
21 6400 Suite, Apt. 1 22 Suit	· li	Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23 Fort	Myers +L	28		Trust Fund Contribution	Added to Fees
Zip 339	Country 25 Ce  9. Name and Address of Current I	Zip 30	Country	This corporation owes or has paid the cu     Personal Property Tax due June 30.     Name and Address of New Registered	Yes No
FLC	ORIDGE, CINDY	L- Delet	81 Name		Agent
690	00-29 DANIELS PKWY, #227 RT MYERS FL 33912	Value (	82 Street	Address (P.O. Box Number is Not Acceptable) 9900-29 Daniels PKWY,	* 227
				Fort Myers FL	FU 33912
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	Signal, e, typed or printed name of registered agent a	ind little it implificable (NOTE R	ogistered Agent signature	e required when reinstating) DATE	<u> </u>
12.	OFFICERS AND I		13.	ADDITIONS/CHANGES TO OFFICERS AN	
TITLE	P Randy Eld <b>ri</b> dge	☐ DELETE	1.5 TITLE		☐ Change ☐ Addition
NAME	12181 HAMPTON GREENS COL	IDT	1.2 NAME		
STREET ADDRESS	FORT MYERS FL	<b>2</b> (1)	1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	S	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE	Secretary	Change Addition
NAME	CINDY ELDRIDGE	7	2.2 NAME	Clare Anderson pkwy # 22 6900 + 29 Daniels pkwy # 22	7
STREET ADDRESS	12181 HAMPTON GREENS COL	JRT	2.3 STREET ADDRESS	6900-29 Daniels Provi	. '
CITY-ST-ZIP	FORT MYERS FL		2. 4 CITY-ST-ZIP	Fort Myers, FL 33912	
TITLE		☐ DELETE	31 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY - ST - ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME		!	4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		☐ DÉLETE	4.4 CITY-ST-ZIP		Change Addition
TITLE		L DELETE	5.1 TITLE 5.2 NAME		C. Ottoride C Montrial
NAME STREET ADDRESS		i	5.3 STREET ADDRESS		
			5.4 CITY-ST-ZIP		
CITY-ST-ZIP TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		
14. I hereby c	ertify that the information supplied with	this filing does not qualify for t	he exemption state	ed in Section 119.07(3)(i), Florida Statutes. I further co	ertify that the information
officer or o	on this annual report or supplemental a director of the corporation or the receive or Block 13 if changed, or on an attachr	or or trustee empowered to exe	ate and that my sig acute this report as	gnature shall have the same legal effect as if made un required by Chapter 607, Florida Statutes; and that	nder oath; that I am an my name appears in