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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # G09599 (3) CUSTOM COMPUTER SYSTEMS/SOFTWARE, INC. Principal Place of Business Mailing Address							
NI OTTO TE OF		711 01 101 12 00112 0000			3. Date Incorporated or Qualified	3a. Date of	,
9 Principal Pl	ace of Business	2a. Mailing Address			11/24/1982 4. FEI Number	05/01/1	Applied For
21	ince or Equipment	26 Ividining Address			59-2238409		Not Applicable
Suite, Apt i	t, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired		.75 Additional
City & State		City & State			6 Floation Compolar Financina	·····	ee Required
23		28			6. Election Campaign Financing Trust Fund Contribution		5.00 May Be added to Fees
Z ₁ 0 24	Country 25	Zip	Countr	У	8. This corporation has liability for Florida Statutes	intangible tax ur	
24)	9. Name and Address of Curren	29 Registered Agent	30		10. Name and Address of New Re		
	PHENS, PAUL E., JR.		81	Name			
	7 LITTLE JOE COURT		83	Street Add	ddress (P.O. Box Number is Not Acceptable)		
APC	PKA FL 32712		8:				
			84	1 City		Top	Zip Code
 Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the office or registered agent, or both, in the State of Florida. Such change was authorized. 				1		FL B5	·
agent I ar SIGNATURE	in familiar with, and accept the obligation of registered ago OFFICERS AND	itions of, Section 607.0505, F	forida Statute	98. 	ited when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE	
12.	P OFFICERS AND	DELETE	1.1 TITLE	T	ADDITIONS/CHAINGES TO OFFI	CENS AND DINE	
NAME STHEFT ADDRESS CITY - ST - ZIP	STEPHENS, PAUL E JR 3307 LITTLE JOE CT APOPKA, FL 00000		1.2 NAME 1.3 STREE 1.4 CITY-	ET ADDRESS			-
TIBLE	V	DELETE	2.1 TITLE			[] c	hange Addition
NAME	STEPHENS, SIGNE M.		2.2 NAME	I	•,		
STREET ADDRESS	3307 LITTLE JOE CT. APOPKA FL		i i	ET ADDRESS			
CHY-ST-7IP THEF	No. 7		2. 4 CITY 3.1 TITLE		***************************************	[] c	hange
NAMi			3.2 NAME				
STREET ACORESS			J =	ET ADDRESS			
CHY-S1-ZIP		DELETE	3.4 CITY 4.1 TITLE				hange Addition
NAME		C. Dictil	4.1 THE	- 1	•	1	uento 🗀 Vocioni
STHEL: ADDRESS			1	ET ADDRESS			
C(1Y+S)+2IF			4.4 CITY -				
TITLE		☐ DELETE	5.1 TITLE	- 1		. □ c	hange
NAME OTHER DATES OF			5.2 NAME	i			
STREET ADDRESS				ET ADDRESS			
CHY-SI-7IP THE!	1137	DELETE	5.4 CITY- 6 1 TITLE	· 	W + P		hange
NAME		The state of the s	6.2 NAME	ſ			
STEEFT ADDRESS				ET ADDRESS			
CITY-St-ZiF	781 - 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		64 CITY -				
14. I do heret informatio I am an of	by certify that the information supplied in indicated on this annual report or s ficer or director of the corporation or	I with this filing does not qua upplemental annual report is the receiver or trustee empo	alify for the ex true and acc swered to exe	emption state curate and that cute this repo	ed in Section 119.07(3)(i), Florida Statute at my signature shall have the same leg ort as required by Chapter 607, Florida	es. I further certi al effect as if ma Statutes; and tha	fy that the ide under oath; that at my name

FILED

Apr 25 1997 8:00am

Secretary of State