FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT **1996**

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

DOCUMENT # **K03644** **(7)**

1. Corporation Name

HULL SPEED DATA PRODUCTS, INC.

Principal Place of Business

1800 PENN ST.
STE 8
MELBOURNE FL 32901
US

Mailing Address

P O BOX 1749
MELBOURNE FL 32902
US

3. Date Incorporated or Qualified: **11/24/1987**

3a. Date of Last Report: **08/04/1995**

2. Principal Place of Business — 21

Suite, Apt. #, etc — 22

City & State — 23

Zip — 24 Country — 25

2a. Mailing Address — 26

Suite, Apt. #, etc — 27

City & State — 28

Zip — 29 Country — 30

4. FEI Number: **59-2858540** 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. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

~~MITCHELL, BRUCE A. ESQ~~
~~516 N HARBOR CITY BLVD~~
~~MELBOURNE FL 32935~~

10. Name and Address of New Registered Agent

81 Name: JAMES M. OBRIEN

82 Street Address (P.O. Box Number is Not Acceptable): 1686 WEST HIBISCUS BOULEVARD

83

84 City: MELBOURNE FL 85 Zip Code: 32901

11. Pursuant to the provisions of Sections 607.0502 and 607.0508, 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: [signature] 7/18/96 DATE

Signature: typed or printed name and signature of the officer. Title: Registered Agent signature in printed name and signature.

12. OFFICERS AND DIRECTORS

TITLE	P	☐ DELETE
NAME	ESTUS, DONN R	
STREET ADDRESS	1800 PENN ST.STE 8	
CITY - ST - ZIP	MELBOURNE FL	
TITLE	VS	☐ DELETE
NAME	DELOATCHE, JR., JAMES F	
STREET ADDRESS	558 LAKE ASHLEY CIRCLE	
CITY - ST - ZIP	W. MELBOURNE FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY - ST - ZIP		
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY - ST - ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 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 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 (if changed), or on an attachment with an address.

SIGNATURE: [signature] 5/20/96 (407) 768-0063

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

JAMES F. DELOATCHE, JR.

CR2E034 (12/95)