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Apr 25 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # N36977 (9)

1. Corporation Name

SOCIETY FOR THE TECHNOLOGICAL ADVANCEMENT OF REPORTING, INC.



Principal Place of Business

Mailing Address

222 S. WESTMONTE DR. #101
ALTAMONTE SPRINGS FL 32714

P.O. BOX 150127
ALTAMONTE SPRINGS FL 32715-0127

3. Date Incorporated or Qualified
03/05/1990

3a. Date of Last Report
05/01/1996

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

Applied For

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

~~XXXXXXXXXX~~ 59-3308744

Not Applicable

22 City & State

27 City & State

5. Certificate of Status Desired

\$8.75 Additional Fee Required

23 Zip

Country

28 Zip

Country

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

24

25

29

30

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KAUTTER, TINA
222 S. WESTMONTE DR., #101
ALTAMONTE SPRINGS FL 32714

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D DELETE
NAME COLLINS, DONNA
STREET ADDRESS 600 N PEARL ST LB 181
CITY-ST-ZIP DALLAS TX

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE D DELETE
NAME HALL, BETH
STREET ADDRESS 5450 TELEGRAPH RD #100
CITY-ST-ZIP VENTURA CA

2.1 TITLE Change Addition
2.2 NAME RENZI, GUY
2.3 STREET ADDRESS 827 W STATE ST
2.4 CITY-ST-ZIP TRENTON NJ 08618

TITLE D DELETE
NAME KAUTTER, TINA
STREET ADDRESS 222 S WESTMONTE DR
CITY-ST-ZIP ALTAMONTE SPGS FL 32714

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE D DELETE
NAME WEBB, LAURIE
STREET ADDRESS 517 S 8TH STREET
CITY-ST-ZIP LAS VEGAS NV

4.1 TITLE Change Addition
4.2 NAME SHARKEY, CANDACE
4.3 STREET ADDRESS 500 W HARBOR DRIVE
4.4 CITY-ST-ZIP SAN DIEGO CA 92101

TITLE V DELETE
NAME DURTSCHI, CHARLES
STREET ADDRESS 2414 NORTH AKARD #600
CITY-ST-ZIP DALLAS TX

5.1 TITLE P Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE P DELETE
NAME PAPPAS, URSULA
STREET ADDRESS 710 5TH AVE. #1000
CITY-ST-ZIP PITTSBURGH PA

6.1 TITLE VP Change Addition
6.2 NAME SODERBERG, SUSAN
6.3 STREET ADDRESS 2233 VINEYARD ST STE A
6.4 CITY-ST-ZIP WAILUKU HI 96793

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

CR2E037 (9/96)