FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT
1996

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

DOCUMENT # P30635 (7)

1. Corporation Name
GLOBAL SERVANTS, INC.

Principal Place of Business	Mailing Address
2290-A S. VOLUSIA AVE. ORANGE CITY FL 32763	2290-A S. VOLUSIA AVE. ORANGE CITY FL 32763

3. Date Incorporated or Qualified: 08/21/1990
3a. Date of Last Report: 04/21/1995

21 2. Principal Place of Business	26 2a. Mailing Address	4. FEI Number: 58-1291607	☐ Applied For ☐ Not Applicable
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.	5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
23 City & State	28 City & State	6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
24 Zip / 25 Country	29 Zip / 30 Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent

RUTLAND, TIM
2062 WEST PRAIRIE CIRCLE
DELTONA FL 32725

10. Name and Address of New Registered Agent

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 Tim Rutland 3-6-96
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	P	☐ DELETE	1.1 TITLE		☒ Change ☐ Addition
NAME	RUTLAND, MARK		1.2 NAME		
STREET ADDRESS	8532 REDLEAF LANE		1.3 STREET ADDRESS	2973 mesa verde	
CITY-ST-ZIP	ORLANDO FL		1.4 CITY-ST-ZIP	Grapevine TX 76051	
TITLE	S	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	RITCH, BOB		2.2 NAME		
STREET ADDRESS	9018 BETHEL CHURCH RD		2.3 STREET ADDRESS		
CITY-ST-ZIP	HIRAM GA		2.4 CITY-ST-ZIP		
TITLE	MD	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	RUTLAND, TIM		3.2 NAME		
STREET ADDRESS	2062 WEST PRAIRIE CIRCLE		3.3 STREET ADDRESS		
CITY-ST-ZIP	DELTONA FL		3.4 CITY-ST-ZIP		
TITLE	DC	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	MOYE, JIM		4.2 NAME		
STREET ADDRESS	1768 MORRIS LANDERS DR		4.3 STREET ADDRESS		
CITY-ST-ZIP	ATLANTA GA		4.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	LOCKETT, LAWRENCE		5.2 NAME		
STREET ADDRESS	1798 OAK HILL ROAD		5.3 STREET ADDRESS		
CITY-ST-ZIP	COVINGTON GA		5.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	BROWN, TOM		6.2 NAME		
STREET ADDRESS	940 S. STEEL BRIDGE RD		6.3 STREET ADDRESS		
CITY-ST-ZIP	EATONTON GA		6.4 CITY-ST-ZIP		

CR2E037 (12/95)

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Mark Rutland 2-29-96 Tel 817-421-3656
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #