

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

**FILED**  
**Mar 09, 1999 8:00 am**  
**Secretary of State**

03-09-1999 90100 044 \*\*\*150.00

PROFIT CORPORATION  
 ANNUAL REPORT  
**1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

**DOCUMENT # P93000088201**

1. Corporation Name  
**FINANCIAL DATA SERVICES, INC.**



Principal Place of Business  
**4800 DEER LAKE DRIVE EAST  
 JACKSONVILLE FL 32246**

Mailing Address  
**4800 DEER LAKE DRIVE EAST  
 JACKSONVILLE FL 32246**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
**12/28/1993**

4. FEI Number  
**13-3749871**

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 owes the current year Intangible Personal Property Tax.  Yes  No

2. Principal Place of Business  
 21 Suite, Apt. #, etc.  
 22 City & State  
 23 Zip Country  
 24

2a. Mailing Address  
 26 Suite, Apt. #, etc.  
 27 City & State  
 28 Zip Country  
 29 30

9. Name and Address of Current Registered Agent  
**C T CORPORATION SYSTEM  
 1200 S PINE ISLAND ROAD  
 PLANTATION FL 33324**

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 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS	
TITLE <b>CD</b>	<input type="checkbox"/> DELETE
NAME <b>ALEX, HARRY P.</b>	
STREET ADDRESS <b>4800 DEER LAKE DRIVE EAST</b>	
CITY-ST-ZIP <b>JACKSONVILLE FL 32246</b>	
TITLE <b>PD</b>	<input type="checkbox"/> DELETE
NAME <b>BRIDY, WILLIAM A</b>	
STREET ADDRESS <b>4800 DEER LAKE DRIVE EAST</b>	
CITY-ST-ZIP <b>JACKSONVILLE FL 32246</b>	
TITLE <b>T</b>	<input type="checkbox"/> DELETE
NAME <b>PLESSER, ROBERT E.</b>	
STREET ADDRESS <b>4800 DEER LAKE DRIVE EAST</b>	
CITY-ST-ZIP <b>JACKSONVILLE FL 32246</b>	
TITLE <b>VP</b>	<input type="checkbox"/> DELETE
NAME <b>HOCKERSMITH, SHARON</b>	
STREET ADDRESS <b>4800 DEER LAKE DRIVE EAST</b>	
CITY-ST-ZIP <b>JACKSONVILLE FL 32246</b>	
TITLE <b>D</b>	<input type="checkbox"/> DELETE
NAME <b>GLENN, TERRY K.</b>	
STREET ADDRESS <b>4800 DEER LAKE DRIVE EAST</b>	
CITY-ST-ZIP <b>JACKSONVILLE FL 32246</b>	
TITLE <b>D</b>	<input type="checkbox"/> DELETE
NAME <b>MIDDLETON, DAVID</b>	
STREET ADDRESS <b>4800 DEER LAKE DR. E.</b>	
CITY-ST-ZIP <b>JACKSONVILLE FL 32246</b>	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE <b>D</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME <b>DINEEN, ROBERT</b>	
1.3 STREET ADDRESS <b>4800 DEER LAKE DRIVE EAST</b>	
1.4 CITY-ST-ZIP <b>JACKSONVILLE, FL 32246</b>	
2.1 TITLE <b>D</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME <b>O'HANLON, KEVIN</b>	
2.3 STREET ADDRESS <b>4800 DEER LAKE DRIVE EAST</b>	
2.4 CITY-ST-ZIP <b>JACKSONVILLE, FL 32246</b>	
3.1 TITLE <b>D</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME <b>THOMPSON, JOHN M.</b>	
3.3 STREET ADDRESS <b>4800 DEER LAKE DRIVE EAST</b>	
3.4 CITY-ST-ZIP <b>JACKSONVILLE, FL 32246</b>	
4.1 TITLE <b>D</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME <b>WINN, DONNA</b>	
4.3 STREET ADDRESS <b>4800 DEER LAKE DRIVE EAST</b>	
4.4 CITY-ST-ZIP <b>JACKSONVILLE, FL 32246</b>	
5.1 TITLE <b>VP</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME <b>ELDER, ROD W.</b>	
5.3 STREET ADDRESS <b>4800 DEER LAKE DRIVE EAST</b>	
5.4 CITY-ST-ZIP <b>JACKSONVILLE, FL 32246</b>	
6.1 TITLE <b>S</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME <b>DONLON, JOHN J.</b>	
6.3 STREET ADDRESS <b>4800 DEER LAKE DRIVE EAST</b>	
6.4 CITY-ST-ZIP <b>JACKSONVILLE, FL 32246</b>	

14. I 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: William A. Bridy President **UNRED** 2/24/99 904 218-5288

CR2E034 (11/98)