

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION  
ANNUAL REPORT  
**1996**



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

**DOCUMENT # S29508 (6)**  
1. Corporation Name  
**PAYASI COMPANY**



Principal Place of Business: **1631 GULF-TO-BAY BLVD. CLEARWATER FL 34615**  
Mailing Address: **1631 GULF-TO-BAY BLVD. CLEARWATER FL 34615**

|                                |             |                         |             |   |  |
|--------------------------------|-------------|-------------------------|-------------|---|--|
| 2. Principal Place of Business |             | 2a. Mailing Address     |             | 3. Date Incorporated or Qualified<br><b>02/04/1991</b>  | 3a. Date of Last Report<br><b>04/24/1995</b> |
| 21                             |             | 26                      |             | 4. FEI Number<br><b>59-3051970</b>  | Applied For<br>Not Applicable                |
| 22. Suite, Apt. #, etc.        |             | 27. Suite, Apt. #, etc. |             | 5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>   |  |
| 23. City & State               |             | 28. City & State        |             | 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>  |  |
| 24. Zip                        | 25. Country | 29. Zip                 | 30. Country | 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |  |

|  |  |  |  |  |                 |
|--|--|--|--|--|-----------------|
| 9. Name and Address of Current Registered Agent                                    |  |  |  | 10. Name and Address of New Registered Agent           |                 |
| <b>JACKSON BRUCE</b><br><b>1631 GULF TO BAY BLVD</b><br><b>CLEARWATER FL 34615</b> |  |  |  | 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: *Bruce Jackson - President* *Sandra Mortham* DATE: **1-17-96**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's name is required when registering)

| 12. OFFICERS AND DIRECTORS |                         |                                 | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |  |   |
|----------------------------|-------------------------|---------------------------------|---|--|---|
| TITLE                      | PD                      | <input type="checkbox"/> DELETE | 1.1 TITLE   |  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       | JACKSON, BRUCE HENRY    |                                 | 1.2 NAME  |  |   |
| STREET ADDRESS             | 1631 GULF-TO-BAY BLVD.  |                                 | 1.3 STREET ADDRESS                                    |  |   |
| CITY-ST-ZIP                | CLEARWATER FL           |                                 | 1.4 CITY-ST-ZIP                                       |  |   |
| TITLE                      | STD                     | <input type="checkbox"/> DELETE | 2.1 TITLE   |  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       | JACKSON, ROY CHARLES    |                                 | 2.2 NAME  |  |   |
| STREET ADDRESS             | 1631 GULF-TO-BAY BLVD.  |                                 | 2.3 STREET ADDRESS                                    |  |   |
| CITY-ST-ZIP                | CLEARWATER FL           |                                 | 2.4 CITY-ST-ZIP                                       |  |   |
| TITLE                      | D                       | <input type="checkbox"/> DELETE | 3.1 TITLE   |  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       | HATCH, ELIZABETH        |                                 | 3.2 NAME  |  |   |
| STREET ADDRESS             | 1631 GULF-TO-BAY BLVD.  |                                 | 3.3 STREET ADDRESS                                    |  |   |
| CITY-ST-ZIP                | CLEARWATER FL           |                                 | 3.4 CITY-ST-ZIP                                       |  |   |
| TITLE                      | VD                      | <input type="checkbox"/> DELETE | 4.1 TITLE   |  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       | JACKSON, KENNETH ROBERT |                                 | 4.2 NAME  |  |   |
| STREET ADDRESS             | 1631 GULF-TO-BAY BLVD.  |                                 | 4.3 STREET ADDRESS                                    |  |   |
| CITY-ST-ZIP                | CLEARWATER FL           |                                 | 4.4 CITY-ST-ZIP                                       |  |   |
| TITLE                      | VD                      | <input type="checkbox"/> DELETE | 5.1 TITLE   |  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       | HEISLER, JOSEPH P.      |                                 | 5.2 NAME  |  |   |
| STREET ADDRESS             | 1631 GULF-TO-BAY BLVD.  |                                 | 5.3 STREET ADDRESS                                    |  |   |
| CITY-ST-ZIP                | CLEARWATER FL           |                                 | 5.4 CITY-ST-ZIP                                       |  |   |
| TITLE                      |                         | <input type="checkbox"/> DELETE | 6.1 TITLE   |  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       |                         |                                 | 6.2 NAME  |  |   |
| STREET ADDRESS             |                         |                                 | 6.3 STREET ADDRESS                                    |  |   |
| CITY-ST-ZIP                |                         |                                 | 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: *Sandra Mortham* *Bruce Jackson - President* DATE: **1-17-96** **815-4612275**

Signature and typed or printed name of signing officer or director Date (Optional) Phone #

CR2E034 (12/95)