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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V28836

(7)

Mailing Address

TOTAL SYSTEMS INTEGRATION, INC.

FILED
Apr 25 1997 8:00am
Secretary of State

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913 GULF BRE SUITE 4 GULF BREEZE US		913 GULF BREEZE PKW Suite 4 Gulf Breeze Fl 32561 US				3. Date Incorporated or Qualified 04/13/1992	3a. Date of L	•		
2. Principa P	lace of Business	2a. Mailing Address				4. FEI Number	1 01110110	Applied	For	
21		26				59-3121809		Not App		
Suite Apt.	# etc	Suite, Apt. #, elc.				5. Certificate of Status Desired		75 Additione Required		
City & State	е	City & State				Election Campaign Financing Trust Fund Contribution		.00 May I		
Zφ	Country	Zip				8. This corporation has liability for it		der s. 199.0	032,	
24	25 29 30					Florida Statutes Yes No 10. Name and Address of New Registered Agent				
	9, Name and Address of C	urrent Hegistered Agent		11 1	Name	10. Name and Address of New He	istered Agent			
	SNICHT, MARIA V.		[" '	varie					
	GULF BREEZE PARKWAY TE #4		[8	2 5	Street Ac	ddress (P.O. Box Number is Not Acceptabl	e)			
GUL	F BREEZE FL 32561		[*	3						
			Ĩ	4 (City		FL 85	Zip Code	****	
office or r	egistered agent, or both, in the	State of Florida Such change wa obligations of Section 607.0505,	s authorized Florida Statu	by th	ne corpo	orporation submits this statement for the pration's board of directors. I hereby acceptions when reinstating)	t the appointme	nt as regist	ered	
12.		S AND DIRECTORS	13.	ндын г	pprature re-	ADDITIONS/CHANGES TO OFFIC		TORS IN 1	12	
70118	P	DELETE	1.1 781	Ε	4	5	☐ Ch		Addition	
NAVE	WEISNICHT, MARIA V.	****	1.2 NAN			WEISNICHT, WILLIAM L				
STREET ADDRESS	1114 MALDONADO		1.3 \$TR	EET AD		114 MALDONADO				
CITY - ST - ZIP	PENSACOLA FL		1.4 CITY			PENSACOLA BEACH, FL 3	2861			
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STREET ADDRESS			6.3 STR		- 1					
CIY-ST ZiP			6.4 CIT	-51-	<u> </u>					

14. To 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 applies 12 or Block 13 or Blo

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARIA V. MEISNIGHT 4/18/97

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