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May 14 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # **V56754** **(7)**

1. Corporation Name
COMMUNITY MANAGEMENT SYSTEMS, INC.

Principal Place of Business	Mailing Address
3711 CORTEZ RD W S300 BRADENTON FL 34210 US	3711 CORTEZ RD W S300 BRADENTON FL 34210-3108 US

3. Date Incorporated or Qualified: **08/06/1992**
3a. Date of Last Report: **04/30/1996**

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

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

4. FEI Number: **65-0363978** ☐ Applied For ☐ Not Applicable

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 has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

ST. JOHN, VALERIE A.
3711 CORTEZ ROAD WEST
SUITE 300
BRADENTON FL 34210

10. Name and Address of New Registered Agent

81 Name: OLSON, ANN M.
82 Street Address (P.O. Box Number is Not Acceptable): 3711 Cortez Rd. W.
83: Suite 300
84 City: BRADENTON FL 85 Zip Code: 34210

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: Ann M. Olson — ANN M. OLSON — 4/24/97
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	VTD	☒ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	WEIDEMILLER, DALE		1.2 NAME		
STREET ADDRESS	3711 CORTEZ RD W		1.3 STREET ADDRESS		
CITY-ST-ZIP	BRADENTON FL		1.4 CITY-ST-ZIP		
TITLE	VSD	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	SCHIER, JAMES R.		2.2 NAME		
STREET ADDRESS	3711 CORTEZ RD W		2.3 STREET ADDRESS		
CITY-ST-ZIP	BRADENTON FL		2.4 CITY-ST-ZIP		
TITLE	ASD	☒ DELETE	3.1 TITLE	ASD	☐ Change ☒ Addition
NAME	ST. JOHN, VALERIE A.		3.2 NAME	OLSON, ANN M.	
STREET ADDRESS	3711 CORTEZ ROAD WEST		3.3 STREET ADDRESS	3711 Cortez Road West	
CITY-ST-ZIP	BRADENTON FL		3.4 CITY-ST-ZIP	BRADENTON FL 34210	
TITLE	PD	☒ DELETE	4.1 TITLE	PTD	☐ Change ☒ Addition
NAME	BARTLEY, JOHN M.		4.2 NAME	Cheryl Wilber	
STREET ADDRESS	3711 CORTEZ RD W		4.3 STREET ADDRESS	7671 PARK BLVD.	
CITY-ST-ZIP	BRADENTON FL		4.4 CITY-ST-ZIP	UNIVERSITY PARK FL 34201	
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (9/96)

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

941-756-0677

SIGNATURE: Ann M. Olson — ANN M. OLSON — 4/24/97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #