

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

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Barbara H. Northam
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 MAY 11 AM 10:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # V62319 (1)

1. Corporation Name

INTELLIGENT MACHINES CORPORATION

Principal Place of Business

1175 N COURTESY PKWY
STE 30
MERRITT ISLAND FL 32953
US 32953

Mailing Address

P O BOX 540920 E 40920
MERRITT ISLAND FL 32954
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 09/04/1992	3a. Date of Last Report 06/24/1994
4. FEI Number 59-3182795	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. The corporation has liability for intangible tax under S. 193.032 Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business

21 Suite Apt #, etc

22 City & State

23

24

2a. Mailing Address

26 Suite Apt #, etc

27 City & State

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29

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9. Name and Address of Current Registered Agent

**MATHIS, JACINTA M
215 N. EOLA DR.
ORLANDO FL 32802**

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

11. Pursuant to the provisions of Sections 607 (b)(3) and 607 (b)(8), Florida Statutes, the above named corporation certifies 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 provisions of Section 607 (b)(8), Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	President
NAME	SPENCER, JAMES E JR
STREET ADDRESS	1042 MANIGAN AVE
CITY, ST, ZIP	OVIEDO FL
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

1. TITLE	President/CEO	☒ Change ☐ Addition
2. NAME		
3. STREET ADDRESS		
4. CITY, ST, ZIP		
5. TITLE	Secretary/Treasurer	☐ Change ☒ Addition
6. NAME	Spencer, Jacqueline J.	
7. STREET ADDRESS	1042 Maniguan Avenue	
8. CITY, ST, ZIP	Oviedo, FL 32765	
9. TITLE		☐ Change ☐ Addition
10. NAME		
11. STREET ADDRESS		
12. CITY, ST, ZIP		
13. TITLE		☐ Change ☐ Addition
14. NAME		
15. STREET ADDRESS		
16. CITY, ST, ZIP		
17. TITLE		☐ Change ☐ Addition
18. NAME		
19. STREET ADDRESS		
20. 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 Sections 193.03(4)(b), 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 and make such 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 of changed or original attachment with an address.

SIGNATURE:

James E. Spencer, Jr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
JAMES E. SPENCER, JR. PRESIDENT

5/4/95

(407) 464-4601