FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
95 MAY -1 PM 2:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 412501 (9)

1. Corporation Name
STEWART BUSINESS SERVICES INC

Principal Place of Business	Mailing Address
1224 RIDGEWOOD AVENUE VENICE FL 34292	1224 RIDGEWOOD AVENUE VENICE FL 34292

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 11/09/1972
3a. Date of Last Report: 04/29/1994

2. Principal Place of Business (21)
2a. Mailing Address (26)
Suite, Apt. #, etc. (22)
Suite, Apt. #, etc. (27)
City & State (23)
City & State (28)
Zip (24) Country (25) Zip (29) Country (30)

4. FEI Number: 59-1423666 ☐ 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

STEWART, CHARLES E.
1224 RIDGEWOOD AVENUE
VENICE FL 34292

10. Name and Address of New Registered Agent

81 Name: Richard W Bales
82 Street Address (P.O. Box Number is Not Acceptable): 3128 Novus ST
83
84 City: SARASOTA FL 85 Zip Code: 34237

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: Richard W. Bales Pres — Richard W Bales — 4-28-95
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	SD	1.1 TITLE		☒ Change ☐ Addition
NAME	STEWART, GEROGI A.	1.2 NAME	DELETE	
STREET ADDRESS	262 DORCHESTER DR.	1.3 STREET ADDRESS		
CITY-ST-ZIP	VENICE, FL 00000	1.4 CITY-ST-ZIP		
TITLE	VTD	2.1 TITLE		☒ Change ☐ Addition
NAME	STEWART, CHARLES E	2.2 NAME	DELETE	
STREET ADDRESS	262 DORCHESTER DR.	2.3 STREET ADDRESS		
CITY-ST-ZIP	VENICE, FL 00000	2.4 CITY-ST-ZIP		
TITLE	PD	3.1 TITLE	PD	☒ Change ☐ Addition
NAME	BALES, RICAHRD	3.2 NAME	BALES, Richard W	
STREET ADDRESS	3158 NOVUS	3.3 STREET ADDRESS	3128 Novus ST	
CITY-ST-ZIP	SARASOTA, FL 00000	3.4 CITY-ST-ZIP	SARASOTA, Fl 34237	
TITLE	VP	4.1 TITLE	VPD	☒ Change ☐ Addition
NAME	MACINTYRE, SANDRA R.	4.2 NAME		
STREET ADDRESS	2708 SERPULA RD.	4.3 STREET ADDRESS		
CITY-ST-ZIP	VENICE FL	4.4 CITY-ST-ZIP		
TITLE		5.1 TITLE	STD	☐ Change ☒ Addition
NAME		5.2 NAME	BALES, DONNA J.	
STREET ADDRESS		5.3 STREET ADDRESS	3128 Novus ST	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	SARASOTA, Fl. 34237	
TITLE		6.1 TITLE		☐ Change ☐ 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: Richard W Bales — Richard W. Bales Pres. — 4-28-95 — 813-484-2408
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0348217 CP