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 12 PM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000012275 (2)**

1. Corporate Name
ALDA MANAGEMENT SYSTEMS, INC.

Principal Place of Business
1805 HIDDEN LK. DR
ROCKLEDGE FL 32955
US

Mailing Address
P.O. BOX 560249
ROCKLEDGE FL 32956-0249

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/10/1993
3a. Date of Last Report: 06/28/1994

2. Principal Place of Business
21 101 S. Courtenay Pwky #106
Suite Apt # or
22 Merritt Island, Fl
City & State
23 32952 USA
Zip 24 Country 25

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

4. FEI Number: 59-3169356
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. Does corporation have liability for intangible tax under Chapter 199, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
CHAPPELL, DAVID Y.
1805 HIDDEN LAKE DRIVE
ROCKLEDGE FL 32955

10. Name and Address of New Registered Agent
81 Name: Chappell, David Y.
82 Street Address (P.O. Box Number is Not Acceptable): 225 S. Tropical Trail #802
83 Merritt Island 32952
84 City: FL 85 Zip Code

11. Pursuant to the provisions of Section 607.0505 and 607.1607, 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. The corporation is authorized to transact business in Florida and has complied with Section 607.0501, Florida Statutes.

SIGNATURE: 5/14/95

12. OFFICERS AND DIRECTORS

TITLE	P
NAME	CHAPPELL, DAVID Y.
STREET ADDRESS	1805 HIDDEN LAKE DRIVE
CITY, ST, ZIP	ROCKLEDGE FL
TITLE	VPST
NAME	CHAPPELL, LOIS C.
STREET ADDRESS	1805 HIDDEN LAKE DRIVE
CITY, ST, ZIP	ROCKLEDGE FL

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS

TITLE	XX Delete ☐ Add
NAME	
STREET ADDRESS	225 S. Tropical Trail, #802
CITY, ST, ZIP	Merritt Island, Fl 32952
TITLE	XX Delete ☐ Add
NAME	
STREET ADDRESS	225 S. Tropical Trail, #802
CITY, ST, ZIP	Merritt Island, Fl 32952

14. If Florida profit, NOT for profit or cooperative corporation, provide last date of annual meeting, and date by which notice of annual meeting must be received by shareholders under Section 607.0501, Florida Statutes. If Florida profit or cooperative corporation, provide date by which notice of annual meeting must be received by shareholders under Section 607.0501, Florida Statutes. If Florida profit or cooperative corporation, provide date by which notice of annual meeting must be received by shareholders under Section 607.0501, Florida Statutes. If Florida profit or cooperative corporation, provide date by which notice of annual meeting must be received by shareholders under Section 607.0501, Florida Statutes.

SIGNATURE: Lois C. Chappell 5/14/95 407-690 6610
SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR

0421340 FP