

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)**

**PROFIT CORPORATION
ANNUAL REPORT
1995**



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUL -3 AM 8:11

DOCUMENT # 378875 (9)

1. Corporation Name

DATA FINANCIAL, INC.

Principal Place of Business

Mailing Address

1300 GULF LIFE DR., #409
JACKSONVILLE FL 32207

1300 GULF LIFE DR., #409
JACKSONVILLE FL 32207

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **03/16/1971** 3a. Date of Last Report **05/01/1994**

2. Principal Place of Business

2a. Mailing Address

21 **1300 RIVERPLACE BLVD**

26 **1300 RIVERPLACE BLVD**

22 **SUITE 408**

27 **SUITE 408**

23 **JACKSONVILLE FL**

28 **JACKSONVILLE FL**

24 **32207**

25 **DUVAL**

29 **32207**

30 **DUVAL**

4. FID Number **59-1346974**

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Filing of Corporate Documents
Filed Electronically

\$5.00 May Be
Added to Fees

7. This corporation has liability for intangible tax under s. 199.012
Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**JACKSON, FRED C., JR.
1300 GULF LIFE DR.
SUITE 409
JACKSONVILLE FL 32207**

81 Name **FRED C. JACKSON, JR.**
82 Street Address (P.O. Box Number is Not Acceptable)
1300 RIVERPLACE BLVD
83 **SUITE 408**
84 City **JACKSONVILLE** 85 **FL** 86 Zip Code **32207**

11. Pursuant to the provisions of Sections 607.0602 and 607.1506, 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, thereby, accept the appointment as registered agent I am named with and accept the obligations of Section 607.0605, Florida Statutes.

SIGNATURE

Agent's Name (Print Name of Registered Agent and the Corporation)

Signature (Registered Agent sign and sign over company)

DATE

12. OFFICERS AND DIRECTORS

13. ASSISTANT SECRETARIES

| TITLE | NAME | STREET ADDRESS | CITY | STATE | ZIP |
|-------|---------------------|---|------|-------|-----|
| PD | JACKSON, FRED C. JR | 1300 GULF LIFE DR., #409 JACKSONVILLE FL | | | |
| ST | JACKSON, FRED C. JR | 1300 GULF LIFE DR., #409 JACKSONVILLE FL | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

| TITLE | NAME | STREET ADDRESS | CITY | STATE | ZIP | Change | Addition |
|---------|----------------------|---|------|-------|-----|-------------------------------------|-------------------------------------|
| P, D, T | JACKSON, FRED C. JR. | 1300 RIVERPLACE BLVD, SUITE 408 JACKSONVILLE, FL 32207 | | | | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| V | CLEMENTS, EDWIN O. | 1300 RIVERPLACE BLVD, SUITE 408 JACKSONVILLE, FL 32207 | | | | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| V | FAISON, T. BROOKS | 1300 RIVERPLACE BLVD, SUITE 408 JACKSONVILLE, FL 32207 | | | | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| V | DeSORBO, STEPHEN | 1300 RIVERPLACE BLVD, SUITE 408 JACKSONVILLE, FL 32207 | | | | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| S | CALHOUN, DEAN | 1300 RIVERPLACE BLVD, SUITE 408 JACKSONVILLE, FL 32207 | | | | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| | | | | | | <input type="checkbox"/> | <input type="checkbox"/> |

14. I, the undersigned, certify that the information suggested with this filing is voluntarily furnished and deemed not qualify for the exemption outlined in Sections 110.07(1)(a) Florida Statutes. I further certify that the information submitted on this annual report or biennial report is true and accurate and that my signature shall have the same legal effect as if made by me. I am an officer or director of the corporation or the receiver or trustee or assignee named to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report or as an attachment with an affidavit.

SIGNATURE: *Fred C. Jackson, Jr. President*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JUNE 27, 1995 (904) 399-3700

CR2E034 (3/95)