

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

CORPORATION ANNUAL REPORT 1995		 FLORIDA DEPARTMENT OF STATE Sandra B. Montross Secretary of State DIVISION OF CORPORATIONS		APPROVED AND FILED	
DOCUMENT # 552500 1. Corporation Name HOLLER CUSTOMER SERVICES COMPANY		(1)		95 MAY -1 AM 10:15 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business 860 FAIRBANKS AVENUE P. O. BOX 1720 WINTER PARK FL 32789-4715		Mailing Address 860 FAIRBANKS AVENUE P. O. BOX 1720 WINTER PARK FL 32789-4715		DO NOT WRITE IN THIS SPACE	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip		3. Date Incorporated or Qualified 11/30/1977 3a. Date of Last Report 05/01/1994 4. FEI Number 59-2870918 5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required 6. Election Campaign Financing ☐ \$5.00 May Be Added to Fees 7. This corporation has liability for intangible tax under S. 199.033 Florida Statutes ☐ Yes ☒ No	
9. Name and Address of Current Registered Agent HOLLER, ROGER W., JR. 860 FAIRBANKS AVENUE WINTER PARK FL 32789				10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	
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 _____ DATE _____ (Signature must be printed name of registered agent and the corporation)					
12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	1. TITLE	☐ Change ☐ Addition		
NAME	HOLLER, ROGER W. JR	2. NAME			
STREET ADDRESS	860 FAIRBANKS AVENUE	3. STREET ADDRESS			
CITY, ST, ZIP	WINTER PARK FL	4. CITY, ST, ZIP			
TITLE		21. TITLE	☐ Change ☐ Addition		
NAME		22. NAME			
STREET ADDRESS		23. STREET ADDRESS			
CITY, ST, ZIP		24. CITY, ST, ZIP			
TITLE		31. TITLE	☐ Change ☐ Addition		
NAME		32. NAME			
STREET ADDRESS		33. STREET ADDRESS			
CITY, ST, ZIP		34. CITY, ST, ZIP			
TITLE		41. TITLE	☐ Change ☐ Addition		
NAME		42. NAME			
STREET ADDRESS		43. STREET ADDRESS			
CITY, ST, ZIP		44. CITY, ST, ZIP			
TITLE		51. TITLE	☐ Change ☐ Addition		
NAME		52. NAME			
STREET ADDRESS		53. STREET ADDRESS			
CITY, ST, ZIP		54. CITY, ST, ZIP			
TITLE		61. TITLE	☐ Change ☐ Addition		
NAME		62. NAME			
STREET ADDRESS		63. STREET ADDRESS			
CITY, ST, ZIP		64. CITY, ST, ZIP			
14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemptions stated in Sections 110.07(6)(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 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, with an attachment with an address.					
SIGNATURE: _____ WIGNATUNE AND TYPE OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR Roger W. Holler Jr.		5/1/95 Date		645-4131 Telephone Number	