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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

607890

(1)

DOCUMENT #

1. Corporation Name COMPUTER ENGINEERING AND PROGRAMMING, INC.

| Princip | al | Place | of | Busin | ess |
|---------|----|-------|----|-------|-----|
| 2825    | R  | WINT  | FR | LAKE  | RD  |

Mailing Address



| LAKELAND FL 33803    |                       |  |                 | LAKELAND FL 33803     |                 |                  |                                       |                        |                                    |                       |  |  |                            |         |                              |                 |
|----------------------|-----------------------|--|-----------------|-----------------------|-----------------|------------------|---------------------------------------|------------------------|------------------------------------|-----------------------|--|--|----------------------------|---------|------------------------------|-----------------|
|                      |                       |  |                 |                       |                 |                  |                                       | 3.                     | Date (25/19                        | rated or              | Qualified                              | 3a. (                                  | Date of Las<br>05/12/      | 199     | port                         | _               |
| 2. Principal Pla     | ice of Business       | ;  | 2a. M           | failing Address       |                 |                  |                                       | 4.                     | FEI Number                         | <del>- i</del>        |  |  |                            |         | oplied For                   | -               |
| 21                   |                       |  | 26              |                       |                 |                  |                                       |                        | FEI Number<br><b>59-188</b>        | 1768                  |  |  | <u> </u> -                 |         | ot Applicable                | -               |
| Suite, Apt. 4        | t, etc.               |  | 27 S            | uite, Apt. #, etc.    |                 |                  |                                       | 5.                     | Certificate of                     | Status D              | esired                                 |  |                            | 75      | Additional additional        |                 |
| City & State         |                       |  | 0               | ity & State           |                 |                  |                                       | 6.                     | Election Cam                       | paign Fir             | nancing                                |  | <del></del>                |         | May Be                       | -               |
| 23                   |                       |  | 28              |                       |                 |                  |                                       |                        | Trust Fund C                       | ontributio            | on                                     |  |                            |         | to Fees                      |                 |
| Zρ                   |                       | Country  |                 | ip                    | Cou             | ntry             |                                       | 8.                     | This corporat                      |                       |  |  |                            | ers 1   | 99.032,                      | 7               |
| 24                   | 25                    | · L  | 29              |                       | 30              |                  |                                       | Ц                      | Florida Stalut                     |                       |  | s 🔲 No                                 |                            |         |                              |                 |
|                      | 9, Name ar            | nd Address of Curr   | ent Register    | ed Agent              |                 | 81               | Name                                  | 10.                    | Name and A                         | Address               | of New I                               | Register                               | ed Agent                   |         |                              | _               |
| ELLIS, R             | ICHARD E              |  |                 |                       |                 | ַר'י ו           | Narne                                 |                        |                                    |                       |  |  |                            |         |                              |                 |
|                      | MINTER LAK            | E RD.  |                 |                       | ļ               | 82               | Street Add                            | iress (P.              | O. Box Numb                        | er is Not             | Acceptal                               | ble)                                   |                            |         |                              | 1               |
|                      | ID FL 33803           |  |                 |                       | }               | 83               |                                       |                        |                                    |                       |  |  |                            |         |                              | _               |
|                      |                       |  |                 |                       |                 | 00               |                                       |                        |                                    |                       |  |  |                            |         |                              |                 |
|                      |                       |  |                 |                       |                 | 84               | City                                  |                        |                                    |                       |  | F                                      | 85                         | Zip     | Code                         |                 |
| I OLIOGISION         | ou agont, or oc       | s of Sections 607.050<br>th, in the State of Fic<br>the obligations of, Se | mba, şuçn ci    | tange was authoriz    | rea by the c    | ve-nar<br>orpora | med corpor<br>ation's boa             | oration s<br>ard of di | ubmits this sta<br>rectors. I here | atement t<br>by accep | for the pu<br>of the app               | irpose of<br>pointment                 | changing i<br>t as registe | its reg | istered office<br>gent. I am |                 |
| SIGNATURE            |                       | -  |                 |                       |                 |                  |                                       |                        |                                    |                       |  |  |                            |         |                              |                 |
|                      | Signature, typed or p | rinted name of registered aga  |                 |                       | OTL: Registered | Agrint si        | griature require                      |                        |                                    |                       |  | DATI                                   |                            |         |                              | <u>10</u>       |
| 12.<br>TITLE         | PST                   | OFFICERS A   | ND DIRECTO      |                       | 13.             |                  |                                       |                        | ADDITIONS/C                        | HANGE                 | S TO OFF                               | ICERS A                                |                            |         |                              | ါ့ နို          |
| NAME                 | ELLIS, RIC            | HARD E   |                 | DELETE                | 1, 1 (1)        |                  | i                                     |                        |                                    |                       |  |  | Chan                       | ge      | Addition                     | 15              |
| ! i                  |                       | INTER LAKE RD.   |                 |                       | 1.2 NA          |                  |                                       |                        |                                    |                       |  |  |                            |         |                              | 8               |
| STREET ADDRESS       | LAKELANI              |  |                 |                       |                 | REET AD          |                                       |                        |                                    |                       |  |  |                            |         |                              | ĺЙ              |
| CITY-ST-ZIP<br>TITLE | ٧                     |  |                 | C) DELETE             |                 | Y-\$1-2          | ZIP                                   |                        |                                    |                       |  |  |                            |         |                              | CR2E034 (12/95) |
| NAME                 | ELLIS, SAI            | NDRA L.  |                 | L) beer it            | 2. 1 TI         |                  |                                       |                        |                                    |                       |  |  | ☐ Chan                     | ge      | Addition                     | 1               |
| STREET ADDRESS       | 2825 B W              | inter lake RD.   |                 |                       |                 |                  | Dares                                 |                        |                                    |                       |  |  |                            |         |                              |                 |
| CITY-ST-ZIP          | LAKELANI              | ) FL   |                 |                       |                 | REET AD          |                                       |                        |                                    |                       |  |  |                            |         |                              |                 |
| TITLE                |                       |  |                 | DELETE                | 3, 1 717        | Y-SI-7           | (1t.                                  |                        |                                    |                       |  | ······································ | ☐ Chan                     |         | Addition                     | -               |
| NAME                 |                       |  |                 |                       | 3.2 NA          |                  | ł                                     |                        |                                    |                       |  |  | [1] Citali                 | ye      | [_] Audition                 |                 |
| STREET ADDRESS       |                       |  |                 |                       |                 | ree i ad         | DRESS                                 |                        |                                    |                       |  |  |                            |         |                              |                 |
| CITY - S1 - ZIP      |                       |  |                 |                       |                 | Y-S1-2           |                                       |                        |                                    |                       |  |  |                            |         |                              | 1               |
| TITLE                |                       |  |                 | DELE1E                | 4. 1 747        |                  |                                       |                        |                                    |                       |  |  | [7] Chand                  | ae      | Addition                     | 4               |
| NAME                 |                       |  |                 |                       | 4.2 NA          |                  |                                       |                        |                                    |                       |  |  |                            | ٠.      |                              |                 |
| STREET ADDRESS       |                       |  |                 |                       | 4.3 STF         | REET AD          | DRESS                                 |                        |                                    |                       |  |  |                            |         |                              |                 |
| CITY-ST-ZIP          |                       |  |                 |                       |                 | Y- \$1-Z         |                                       |                        |                                    |                       |  |  |                            |         |                              |                 |
| TITLE                |                       |  |                 | DELETE                | 5 1 TH          |                  | · · · · · · · · · · · · · · · · · · · |                        |                                    | •••••                 |  |  | Chang                      | ge      | Addition                     | 1               |
| NAME                 |                       |  |                 |                       | 5.2 NA          | ME               |                                       |                        |                                    |                       |  |  | `                          |         | <del></del>                  |                 |
| STREET ADDRESS       |                       |  |                 |                       | 5 3 5 1         | REET ADI         | DRESS                                 |                        |                                    |                       |  |  |                            |         |                              | 1               |
| CITY-ST-ZIP          |                       |  |                 |                       |                 | Y-ST-Z           |                                       |                        |                                    |                       |  |  |                            |         |                              | 1               |
| TITLE                |                       |  |                 | DELETE                | 6 1 111         |                  |                                       |                        |                                    |                       | ······································ | ·····                                  | ☐ Chang                    | <br>je  | Addition                     | 1               |
| NAME                 |                       |  |                 |                       | 6.2 NA          | MΞ               |                                       |                        |                                    |                       |  |  | _ `                        |         |                              | 1               |
| STREET ADDRESS       |                       |  |                 |                       | 6.3 STF         | REET ADI         | DRESS                                 |                        |                                    |                       |  |  |                            |         |                              |                 |
| CITY-ST-ZIP          |                       |  |                 |                       | 6 4 CIT         | Y - ST - Z       | ¥P                                    |                        |                                    |                       |  |  |                            |         |                              |                 |
| 14. Ldo hereby       | certify that the      | Information supplied   | Lwith this film | o ic voluntarily furn | sichod and a    | loop n           | ot qualify fo                         | for the e              | woonting state                     | od in Ca              | V 110                                  | 0.7/01/11                              | F1 11 0                    |         |                              | -1              |

control of the early treature mormation 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 both; 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

Daytime Phone #