FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1996

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

FILED
95 JAN 11 PM 5:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **637933** **(3)**

1. Corporate Name
RESEARCH DATA SERVICES, INC.

Principal Office
4830 W. KENNEDY BLVD. STE 440
TAMPA FL 33609

Mailing Address
4830 W. KENNEDY BLVD. STE 440
TAMPA FL 33609

effective 1/27/96

DO NOT WRITE IN THIS SPACE

2. Principal Street Address
21 600 South Magnolia Avenue
22 Suite 350
23 Tampa FL
24 33606 25 Country

2a. Mailing Address
26 same
27
28
29 Zip 30 Country

3. Date Incorporated or Qualified: **09/28/1979**

3a. Date of Last Report: **05/26/1994**

4. FEI Number: **59-2042612**

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

KLAGES,WALTER J.
2612 W LYKES CT.
TAMPA FL 33611

10. Name and Address of New Registered Agent

81 Name same
82 Street Address (P.O. Box Number is Not Acceptable) 600 South Magnolia Avenue
83 Suite 350
84 City Tampa **FL** 85 Zip Code 33606

11. Pursuant to the provisions of Section 607.0502, 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 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 that position as provided for in Florida Statutes.

Signature: W Klages IC Evans Date: 1/4/96

12. OFFICERS AND DIRECTORS

PDT
KLAGES,WALTER J.
2612 W LYKES CT.
TAMPA FL
VS
EVANS, ILENE CLAIRE
4830 W. KENNEDY BLVD.
TAMPA FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 Title ☐ Change ☐ Address
2 Name
3 Street Address
4 City St Zip
02/08/96--01015--024
****200.00 ****200.00
5 Title ☐ Change ☐ Address
6 Name
7 Street Address
8 City St Zip
9 Title ☐ Change ☐ Address
10 Name
11 Street Address
12 City St Zip
13 Title ☐ Change ☐ Address
14 Name
15 Street Address
16 City St Zip
17 Title ☐ Change ☐ Address
18 Name
19 Street Address
20 City St Zip CH 1-11-96

14. For profit corporations only. Pursuant to Section 607.0193(4), Florida Statutes, the undersigned submits the following statement: I am aware and affirm that the corporation will comply with the applicable requirements of Section 607.0193, Florida Statutes. I further certify that the corporation has complied with the applicable requirements of Section 607.0193(4), Florida Statutes. I further certify that I am authorized by the corporation to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: W Klages I C Evans-Klages 1/4/96
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date