

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 4-23-96 B -

DOCUMENT # F63520 (3)

1. Corporation Name

AZIMUTH CORPORATION



Principal Place of Business

5401 TECH DATA DR
CLEARWATER FL 34620

Mailing Address

5401 TECH DATA DR
CLEARWATER FL 34620

3. Date Incorporated or Qualified

01/12/1982

3a. Date of Last Report

04/27/1995

2. Principal Place of Business

2a. Mailing Address

21 13325 US HWY 19 N

26 13325 US HWY 19 N

4. FEI Number

59-2229975

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

X

\$8.75 Additional
Fee Required

23 City & State
CLEARWATER, FL

28 City & State
CLEARWATER, FL

6. Election Campaign Financing
Trust Fund Contribution

□

\$5.00 May Be
Added to Fees

24 Zip
34624

25 Country
PINELLAS

29 Zip
34624

30 Country
PINELLAS

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

□ Yes

□ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CRANTON, GEORGE D
5401 TECH DATA DR
CLEARWATER FL 34620

81 Name

CRANTON, GEORGE D.

82 Street Address (P.O. Box Number is Not Acceptable)

13325 US HWY 19 N

83

84 City

CLEARWATER

FL

85 Zip Code
34624

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

(Signature, typed or printed name of registered agent, and title if applicable)

GEORGE D. CRANTON, PRESIDENT

04/15/96

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PTD
CRANTON, GEORGE D
5401 TECH DATA DRIVE
CLEARWATER FL
□ DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
PTD
CRANTON, GEORGE D
13325 US HWY 19 N
CLEARWATER, FL 34624
XX Change □ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VAT
WALL, BARRY L
5401 TECH DATA DRIVE
CLEARWATER FL
□ DELETE

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
VAT
WALL, BARRY L
13325 US HWY 19 N
CLEARWATER, FL 34624
XX Change □ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
□ DELETE

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
□ Change □ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
□ DELETE

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
□ Change □ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
□ DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
□ Change □ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
□ DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP
□ Change □ Addition

14. I do hereby certify that the information 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 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, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/15/96

813-530-7099

Date

Daytime Phone

CR2E034 (12/95)