FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
Division of Corporations

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JAN 17 PM 1:26

DOCUMENT # F81154 (9)

1. Corporate Name
SYNTAX, INC.

Principal Place of Business
% BRUCE KENT EVANS
41401 SUNSHINE AVENUE
UMATILLA FL 32784

Mailing Address
% BRUCE KENT EVANS
41401 SUNSHINE AVENUE
UMATILLA FL 32784

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 05/10/1982
3a. Date of Last Report: 01/27/1994

2. Principal Place of Business
21
Suite, Apt. # or Bldg.
22
City & State
23
Zip
24
County
25

2a. Mailing Address
26
Suite, Apt. # or Bldg.
27
City & State
28
Zip
29
County
30

4. FEI Number: 59-2188812 — 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
EVANS, MAGGIE B.
131 WATERMAN AVE
MT.DORA FL 32757

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 607.0505 and 607.0506, 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 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

12. OFFICERS AND DIRECTORS

	PD
NAME	EVANS, BRUCE KENT
STREET ADDRESS	41401 SUNSHINE AVENUE
CITY, ST, ZIP	UMATILLA FL
	STD
NAME	EVANS, MAGGIE BARRAGRY
STREET ADDRESS	41401 SUNSHINE AVENUE
CITY, ST, ZIP	UMATILLA FL

13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12

	NAME	☐ Change ☐ Addition
	STREET ADDRESS	
	CITY, ST, ZIP	
	NAME	☐ Change ☐ Addition
	STREET ADDRESS	
	CITY, ST, ZIP	
	NAME	☐ Change ☐ Addition
	STREET ADDRESS	
	CITY, ST, ZIP	
	NAME	☐ Change ☐ Addition
	STREET ADDRESS	
	CITY, ST, ZIP	
	NAME	☐ Change ☐ Addition
	STREET ADDRESS	
	CITY, ST, ZIP	
	NAME	
	STREET ADDRESS	
	CITY, ST, ZIP	

14. [illegible]

SIGNATURE: Bruce K. Evans 01/10/94 904-735-1278
SIGNATURE AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR

0051507 CP