

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 AM 5:29

DOCUMENT # F92000000622 (2)

1. Corporation Name

S. D. SHEPHERD SYSTEMS, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

**1401 MANATEE AVENUE WEST, SUITE 1000
BRADENTON FL 34205**

Mailing Address

**1401 MANATEE AVENUE WEST, SUITE 1000
BRADENTON FL 34205**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/11/1992

3a. Date of Last Report

05/13/1994

4. FEI Number

76-0213055

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. The corporation has liability for intangible tax under S. 199.032,
Florida Statutes.

☒ Yes

☐ No

2. Principal Place of Business

21

State Apt. # etc.

22

City & State

23

2a. Mailing Address

26

State Apt. # etc.

27

City & State

28

Country

30

9. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

B3

B4 City

FL

B5 Zip Code

11. Pursuant to the provisions of Sections 607.012 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, as set forth 607.012, Florida Statutes.

SIGNATURE

By the corporation, signed by its registered agent or its authorized

By the corporation, signed by its registered agent or its authorized

By

12. OFFICERS AND DIRECTORS

TYPE	PD
NAME	SHEPHERD, STEVEN J
STREET ADDRESS	1401 MANATEE AVENUE WEST, SUITE 1000
CITY, ST, ZIP	BRADENTON FL 34205
TYPE	VD
NAME	SHEPHERD, DARYL W
STREET ADDRESS	1401 MANATEE AVENUE WEST, SUITE 1000
CITY, ST, ZIP	BRADENTON FL 34205
TYPE	S
NAME	WEDDING, DOUGLAS R
STREET ADDRESS	1401 MANATEE AVENUE WEST, SUITE 1000
CITY, ST, ZIP	BRADENTON FL 34205
TYPE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TYPE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TYPE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

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

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 199.032(3)(a), 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. 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 as required, or in an addendum with an address.

SIGNATURE:

Daryl W Shepherd
SIGNATURE APPROVED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daryl W Shepherd 4/26/95

(813) 747-5007