

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F93000003577**

1. Corporation Name
ROTADATA, INC.

FILED
Jul 15, 1999 8:00 am
Secretary of State

07-15-1999 90013 025 ***550.00



Principal Place of Business
1211 SEMORAN BLVD.
STE 101
CASSELBERRY FL 32707
US

Mailing Address
1211 SEMORAN BLVD.
STE 101
CASSELBERRY FL 32707
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/30/1993

4. FEI Number

31-1002633

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 owes the current year
Intangible Personal Property.

☐ Yes ☐ No

2. Principal Place of Business
21 **931 SOUTH SEMORAN BLVD**

2a. Mailing Address
26 **931 SOUTH SEMORAN BLVD**

Suite, Apt. #, etc.

22 **SUITE 208**

Suite, Apt. #, etc.

27 **SUITE 208**

City & State
23 **WINTER PARK FLORIDA**

City & State
28 **WINTER PARK FLORIDA**

Zip Country
24 **FL 32792** 25 **USA**

Zip Country
29 **FL 32792** 30 **USA**

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION FL 33324

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 607.0502 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.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CDP
TAYLOR, JOHN
BATEMAN ST., DERBY DE3 3JK
ENGLAND

☐ DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VPDT
YORKE, ROBERT A
BATEMAN ST., DERBY DE3 8JK
ENGLAND

☐ DELETE

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DVP
EDMUNDSON, BRIAN H
BATEMAN ST., DERBY DE3 8JK
ENGLAND

☐ 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
S
KOHLHEPP, WILLIAM G
1200 CAREW TOWER
CINCINNATI OH 45202

☐ 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
VP
PANZL, JOSEPH R
KAY, PANZL & LATHAM, 390 N. ORANGE AVE#600
ORLANDO FL 32801

☐ 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 hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(l), 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:

BRIAN EDMUNDSON V.P.

7/6/99

Date

Daytime Phone #

CR2E034 (5/99)