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**

City & State

23

24

Zip

400000cc74

DOCUMENT # F9400006674 (5) 1. Corporation Name					
EXCEL TRAINING SERVIC	ES, INC.				
Principal Place of Business	Maling Address				
1265 MINHINETTE DR. #150 ROSWELL GA 30075	1265 MINHINETTE DR. #150 ROSWELL GA 30075				
		3.			
Principal Place of Business 1	2a. Mailing Address	4.			
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5.			

28

Country

City & State

Ζip

☐ Yes 📈 No 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name THE PRENTICE-HALL CORPORATION SYSTEM, INC. Street Address (P.O. Box Number is Not Acceptable) 82 1201 HAYS ST., #105 83 TALLAHASSEE FL 32301 84 City Zip Code 85

Country

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. Thereby accept the appointment as registered agent. Tam familiar with, and accept the obligations of. Section 607.0505. Florida Statutes.

	n, and decept the obligations of, exector ear.	cooo, monoa otatatos.		
SIGNATURE :	Signature, typed or printed han a of registered agent and title if a	approacie (NCS	E: Registereo Agent signature required	who reinstating) DATE
12.	OFFICERS AND DIREC	TORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLÉ	PD	☐ DELETE	1. 1 TITLE	☐ Change ☐ Addition
NAME	jenkins, robert p jr		1.2 NAME	
STREET ADDRESS	1265 MINHINETTE DR., #150		13 STREET ADDRESS	
CITY - ST - ZIP	ROSWELL GA 30075		1.4 CITY-ST-ZIP	
TITLE	VSD	DELETE	2 1 11/11	Crange Addition
NAME	BOWLES, STEVEN P		2.2 NAMÉ	
STREET ADDRESS	1265 MINHINETTE DR., #150		2.3 STREET ADDRESS	
CITY-ST-ZIP	ROSWELL GA 30075		2 4 CITY - ST - Z-P	
TITLE		DELETE	3 1 10 LE	☐ Change ☐ Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CHY-S1-ZIP			3.4 CHY - ST - ZIP	
TETLE		□ DELETE	4 1 TOTLE	☐ Change ☐ Addition
NAME			4.2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY - ST - ZiP			4.4 CITY - ST - ZIP	
TilTE		DELETE	5 1 TIFLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-S1-ZIP			54 CITY-SF-ZIP	
TITLE		☐ DELETE	6 1 TillE	☐ Change ☐ Addition
NAME			6 2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	

6.4 CHY-S1-2IP 14. I do hereby certify that the information supplied with this filling 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 supplementa, 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:

OF SIGNING OFFICER OR DIRECTOR

772-587-5264 Dayfille Prone 4

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

3a. Date of Last Report

04/17/1995

Applied For

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable \$8.75 Additional

Date Incorporated or Qualified

12/29/1994

58-2145392

Certificate of Status Dosired

6. Election Campaign Financing

Trust Fund Contribution

FEI Number