## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

Profit Corporation Annual Report

1997

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FLORIDA DEPARTMENT OF STATE

**FILED** 

Mar 31 1997 8:00am

Secretary of State

536-5887. Daytime Phone •

Sandra B. Mortham

Secretary of State \*
DIVISION OF CORPORATIONS

## DOCUMENT # F95000001884 (4)

LAND'S END COMPUTER SERVICE CENTER, INCORPORATED

Principal Place of Business Mailing Address 8340 ULMERTON ROAD, SUITE 200 8340-ULMERTON-ROAD, SUITE 200 ARGO FL 20771-5800 LARGO FL 34641-3. Date Incorporated or Qualified 3a. Date of Last Report 04/18/1995 02/02/1996 2a. Mailing Address 2. Principal Place of Business 4. FEI Number Applied For 59-3304393 Not Applicable 2845 East Bay Drive 2945 East Bay Drive Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired D Fee Required Ste: D City & State Ste City & State \$5.00 May Be 6. Election Campaign Financing Largo Largo Trust Fund Contribution Added to Fees 23 Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032. 24 33771 25 Pinellas Florida Statutes Yes No 33771 Pinellas 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 APOSTOL, JACQUELINE A Name APOSTOL ANNE M. APOSTO
Street Address (P.O. Box Number is Not Acceptable) 8340 ULMERTON ROAD, SUITE 200 82 LARGO FL 94841 2945 EAST BAY DR. Ste D 83 LARGO 84 Çity 85 Zip Code LARGO 33771 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. Lan familiar yath, and accept the obligations of Section 607 0505. Fig. da Statutes. Registered Agent signature required when reinstating) regule OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 96/6) DELETE 2 Change 1.1 TITLE THLE P APOSTOL, JACQUELINE A 1.2 NAME NAME APOSTOL, ANNE M 4215 EAST BAY DRIVE #1405 STREET ADDRESS 1.3 STREET ADDRESS 58 LEXINGTON DR **CLEARWATER FL 34824** 1.4 CITY-ST-ZIP CHY-S1 7IP DUNEDIN FL 34698 DELETE Change Addition  $11^{\circ}LF$ 2.1 TITLE APOSTOL, WILLIAM E.C. 2.2 NAME NAME 4215 EAST BAY DRIVE #1405 2.3 STREET ADDRESS STREET ACCORESS **CLEARWATER FL 34624** CHY- ST-ZIP 2.4 CITY - ST-ZIP DELETE Change Addition TILE 3.1 TITLE APOSTOL, WILLIAM E NAME 32 NAME **58 LEXINGTON DRIVE** STREET ADORESS 3.3 STREET ADDRESS **DUNEDIN FL 34698** 3.4. CITY-ST-ZIP C-TY-S1-ZIP DELETE 4.1 TITLE v Change Addition THILE APOSTOL, ANNE M APOSTOL, JACQUELINE A 4. 2 NAME **58 LEXINGTON DRIVE** 4.3 STREET ADDRESS 4215 EAST BAY DR. #1405 STREET ADORESS **DUNEDIN FL 34698** 4.4 CITY - ST-ZIP CITY- \$1-ZIP CLEARWATER FL 34624 DELETE Change Addition 5.1 TITLE DILE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP COLY - ST - ZIP DELETE Change Addition 6 1 TITLE THEF NAME 6.2 NAME STREET ADORESS 6.3 STREET ADDRESS CHY-S1-281 6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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