SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION **ANNUAL REPORT**

1997

23

24

Zip



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # F95000005342 (9)

Country

9. Name and Address of Current Registered Agent

25

NATIONAL ELECTRONIC INFORMATION CORPORATION

Principal Place of Business	Mailing Address			
TWO LAKEVIEW PLACE 15TH CENTURY BLVD SUITE 600 NASHVILLE TN 37214 US	TWO LAKEVIEW PLACE 15TH CENTURY BLVI SUITE 600 NASHVILLE TN 37214 US			
2. Principal Place of Business	2a. Mailing Address			
21	26			
Suite, Apt. #, etc.	Suite, Apt. #, etc.			
22 _	27			
City & State	City & State			

28

29

Zip

FILED

97 AUG 18 PM 1:12

SECRETARY OF STATE TALLAHASSEE, FLORIDA

3. Date incorporated or Qualified

5. Certificate of Status Desired

6, Election Campaign Financing

Personal Property Tax due June 30.

10. Name and Address of New Registered Agent

Trust Fund Contribution

11/01/1995

13-3052274

4. FEI Number



DO NOT WRITE IN THIS SPACE

8. This corporation owes or has paid the current year Intangible

3s. Date of Last Report

Applied For

Fee Required

\$5.00 May Be

Added to Fees

☐ No

Not Applicable \$8.75 Additional

08/14/1996

Yes

CT	CORPORATION SYSTEM	8	Na Na	me					
1200 SOUTH PINE ISLAND ROAD		Ē	Str	Street Address (P.O. Box Number is Not Acceptable)					
PLAN	ITATION FL 33324	<u> </u>							
		1	33					ì	
		ε	14 Cit		······································		85 Zip C	Code	
						FI	-		
11. Pursuant office or r agent. I a	to the provisions of Sections 607.0502 and 607.1508, Florida Statu egistered agent, or both, in the State of Florida Such change was in familiar with, and accept the obligations of, Section 607.0505, F	utes, the abo authorized Torida Statu	ove-nar by the tes.	ned corporation corporation's bo	submits this stateme	ent for the purpose are by accept the ap	of changing its pointment as	registered registered	
SIGNATURE	Signature, typed or printed name of region and title if appricable. (NO	OTE: Registered /	Agent a gr	SPECIA nature required when re	AL ASSISTANT e-instating)	SECRETARY	8/18	197	
12.	OFFICERS AND DIRECTORS	13.		·	DDITIONS/CHANGES	TO OFFICERS AN	D DIRECTOR	S IN 12	
TITLE	CEOC DELETE	1.1 TITL	E			-	Change	Addition	
NAME	GOAD, FRED C JR.	1.2 NAM	IE.	{	7000	02272 8/20/97(927-	4	
STREET ADDRESS	15 CENTURY BLVD SUITE 600	1.3 STR	EET ADDR	ESS					
CITY-ST-ZIP	NASHVILLE TN	1.4 CITY	- ST- ŽIP		*	***550.00	****55	0.00 -	
TITLE	P DELETE	2.1 TITL	E				Change	Addition	
NAME	CALIRI, RICHARD P	2.2 NAM	tE .						
STREET ADDRESS	188 EAST 64TH STREET, APT 2801	2.3 STR	eet addr	ESS					
CITY - ST - ZIP	NEW YORK NY	2 4 CIT	Y-ST-ZIF	<u> </u>					
TITLE	PCEO DELETE	3.1 TITL	E				☐ Change	Addition	
NAME	KEVER, JIM D	3.2 NAM	E						
STREET ADDRESS	15 CENTURY SUITE 600	3.3 STR	ET ADDR	ESS					
CITY-ST-ZIP	NASHVILLE TN	3.4. CIT	Y - ST - 21P						
TITLE	CEO DELETE	4.1 TITL	E	1			Change	Addition	
NAME	MCNAMARA, KEVIN M	4. 2 NA	Æ						
STREET ADDRESS	15 CENTURY BLVD SUITE 600	4.3 STR	EET ADDR	FSS					
CITY-ST-ZIP	NASHVILLE TN	4.4 City	- S1 - ZIP						
TALE	SVP DELETE	51 TITL	F	1			Change	Addition	
NAME	SCHEITZER, SHEILA H	5.2 NAM	IE.	ļ					
STREET ADDRESS	15 CENTURY BLVD SUITE 600	5.3 STR	ET ADDR	ESS					
CITY-ST-ZIP	NASHVILLE TN		-ST-ZIP						
TITLE	D DEFELE	6.1 TiTL					Change	Addition	
NAME	FORD, WILLIAM	6.2 NAM				4	16 ,4	.71	
STREET ADDRESS	15 CENTURY BLVD SUITE 600		EET ADDR	ESS		/	4-18	'	
CITY-ST-ZIP	NASHVILLE TN		-ST-ZIP	on stated in Sec.	tion 110.07/2\/i\ Flor				
14. I do hereby certify that the information supplied with this filing 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.									
SIGNATURE: SIGNATURED 8-13-97									

Country

81 Name

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