

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

FILED

Feb 25 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # F96000000379 (5)

1. Corporation Name:
LEADER DATA PROCESSING INC.



Principal Place of Business

PO BOX 0
HAZLETON PA 18201

Mailing Address

PO BOX 0
HAZLETON PA 18201-0058

3. Date Incorporated or Qualified

01/23/1996

3a. Date of Last Report

N/A

4. FEI Number

23-1693805

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 has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

2. Principal Place of Business

21 Suite Apt. #, etc.

22 City & State

23 Zip

Country

24

2a. Mailing Address

26 Suite Apt. #, etc.

27 City & State

28 Zip

Country

29

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

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

TITLE CD
NAME MASON, CHARLES J
STREET ADDRESS 1325 E CHESTNUT ST
CITY-ST-ZIP HAZLETON PA 18201

DELETE

TITLE PD
NAME DRIGGS, GERALD E
STREET ADDRESS 319 W DIAMOND AVE
CITY-ST-ZIP HAZLETON PA 18201

DELETE

TITLE VD
NAME SCHNEIDER, GEORGE L
STREET ADDRESS RD #2, BOX 119C
CITY-ST-ZIP WEATHERLY PA 18244

DELETE

TITLE STD
NAME STANCATO, FRANK P JR.
STREET ADDRESS RR1 LIONS DR BOX 1779
CITY-ST-ZIP DRUMS PA 18222

DELETE

TITLE D
NAME STANCATO, NICOLE
STREET ADDRESS RR1 LIONS DR BOX 1779
CITY-ST-ZIP DRUMS PA 18222

DELETE

TITLE D
NAME MATRICCINO, JUDITH
STREET ADDRESS RR2 BOX 1114
CITY-ST-ZIP DRUMS PA 18222

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

Change Addition

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

Change Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

Change Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

Change Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

Change Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

Change Addition

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:

Charles J. Mason
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PRESIDENT

2/20/97

717-455-8511

CR2E034 (9/96)