

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

FILED

Feb 11 1998 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1998

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



DOCUMENT # F96000002281 (1)

1. Corporation Name
DANKA HOLDING COMPANY



Principal Place of Business
11201 DANKA CIRCLE NORTH
ST. PETERSBURG FL 33716

Mailing Address
11201 DANKA CIRCLE NO
TAX DEPARTMENT
ST. PETERSBURG FL 33716
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 05/07/1996	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 13-2973328	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

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	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 his or her 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	CDP	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DOYLE, DANIEL M	1.2 NAME	
STREET ADDRESS	11201 DANKA CIRCLE NORTH	1.3 STREET ADDRESS	
CITY - ST - ZIP	ST. PETERSBURG FL 33716	1.4 CITY - ST - ZIP	
TITLE	DV	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SNELL, DAVID C	2.2 NAME	
STREET ADDRESS	11201 DANKA CIRCLE NORTH	2.3 STREET ADDRESS	
CITY - ST - ZIP	ST. PETERSBURG FL 33716	2.4 CITY - ST - ZIP	
TITLE	DS	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	TAYLOR, DEBRA A	3.2 NAME	
STREET ADDRESS	11201 DANKA CIRCLE NORTH	3.3 STREET ADDRESS	
CITY - ST - ZIP	ST. PETERSBURG FL 33716	3.4 CITY - ST - ZIP	
TITLE	DT	4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	FREEMAN, WILLIAM T	4.2 NAME	
STREET ADDRESS	11201 DANKA CIRCLE NORTH	4.3 STREET ADDRESS	
CITY - ST - ZIP	ST. PETERSBURG FL 33716	4.4 CITY - ST - ZIP	
TITLE	AT	5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MCGRATH, GARY M	5.2 NAME	
STREET ADDRESS	11201 DANKA CIRCLE NO	5.3 STREET ADDRESS	
CITY - ST - ZIP	ST PETERSBURG FL	5.4 CITY - ST - ZIP	
TITLE	AS	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	THORN, W. THOMPSON	6.2 NAME	
STREET ADDRESS	101 E. KENNEDY BLVD., STE. 2800	6.3 STREET ADDRESS	
CITY - ST - ZIP	TAMPA FL 33602	6.4 CITY - ST - ZIP	

14. I 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Paul K. Suijk. 1/30/98 (813) 576-6003

CR2E034 (10/97)