FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
95 MAY -1 AM 11:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F97172 (3)

1. Corporation Name
COLOR IMAGES, INC.

Principal Place of Business	Mailing Address
% STEPHEN D REDDEN 5459 115TH AVENUE NORTH CLEARWATER FL 34620	% STEPHEN D REDDEN 5459 115TH AVENUE NORTH CLEARWATER FL 34620

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 06/27/1982
3a. Date of Last Report: 04/06/1994

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

4. FEI Number: 59-2228003 ☐ 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

7. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

REDDEN, STEPHEN D
5459 115TH AVENUE NORTH
CLEARWATER FL 33520

10. Name and Address of New Registered Agent

81 Name: Alice J. Hall
82 Street Address (P.O. Box Number is Not Acceptable): 715 A First St,
83: Indian Rocks Beach
84 City: FL 85 Zip Code: 34635

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: Alice J. Hall Alice J. Hall 4/4/95
Signature, typed or printed name of registered agent and 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	C	11 TITLE		☐ Change ☐ Addition
NAME	HALL, GLENN W	12 NAME		
STREET ADDRESS	715 A FIRST ST	13 STREET ADDRESS		
CITY-ST-ZIP	INDIAN ROCKS FL	14 CITY-ST-ZIP		
TITLE	P	21 TITLE		☐ Change ☐ Addition
NAME	HALL, ALICE J JONES	22 NAME		
STREET ADDRESS	715 A FIRST ST	23 STREET ADDRESS		
CITY-ST-ZIP	INDIAN ROCKS BCH FL	24 CITY-ST-ZIP		
TITLE	D	31 TITLE		☐ Change ☐ Addition
NAME	REDDEN, STEPHEN D	32 NAME		
STREET ADDRESS	5681 108TH AVE.	33 STREET ADDRESS		
CITY-ST-ZIP	PINELLAS PK. FL	34 CITY-ST-ZIP		
TITLE	T	41 TITLE		☐ Change ☐ Addition
NAME	VARNER, ROBIN LEE	42 NAME		
STREET ADDRESS	5681 108TH AVE.	43 STREET ADDRESS		
CITY-ST-ZIP	PINELLAS PK. FL	44 CITY-ST-ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: Alice J. Hall Alice J. Hall 4/4/95 (813) 573-7723
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone Number

0470431 CR