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Apr 28, 1999 8:00 am
Secretary of State

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PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F98000005143

1. Corporation Name

DANKA HOLDING COMPANY

Principal Place of Business

**11201 DANKA CIRCLE NORTH
ST. PETERSBURG FL 33716**

Mailing Address

**11201 DANKA CIRCLE NORTH
ST. PETERSBURG FL 33716**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/11/1998

4. FEI Number

59-3498367

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 owes the current year intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

2a. Mailing Address

26 11201 Danka Circle N.

Suite, Apt. #, etc.

27 Attn: Tax Department

City & State

28 St. Petersburg FL

Zip

29 33716

Country

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 ☒ DELETE

NAME **PC**
DOYLE, DANIEL M
STREET ADDRESS **11201 DANKA CIRCLE NORTH**
CITY-STATE-ZIP **ST. PETERSBURG FL 33716**

TITLE ☐ DELETE

NAME **V**
AMBLARD, MICHEL
STREET ADDRESS **11201 DANKA CIRCLE NORTH**
CITY-STATE-ZIP **ST. PETERSBURG FL 33716**

TITLE ☒ DELETE

NAME **V**
MEIER, PETER G
STREET ADDRESS **11201 DANKA CIRCLE NORTH**
CITY-STATE-ZIP **ST. PETERSBURG FL 33716**

TITLE ☐ DELETE

NAME **S**
BERG, DAVID P
STREET ADDRESS **11201 DANKA CIRCLE NORTH**
CITY-STATE-ZIP **ST. PETERSBURG FL 33716**

TITLE ☐ DELETE

NAME **AS**
BERRY, L J
STREET ADDRESS **11201 DANKA CIRCLE NORTH**
CITY-STATE-ZIP **ST. PETERSBURG FL 33716**

TITLE ☐ DELETE

NAME **AS**
NELSEN, KEITH J
STREET ADDRESS **11201 DANKA CIRCLE NORTH**
CITY-STATE-ZIP **ST. PETERSBURG FL 33716**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition

NAME **P/D**
Larry K. Switzer
STREET ADDRESS **11201 Danka Circle N.**
CITY-STATE-ZIP **St Petersburg FL 33716**

2.1 TITLE ☐ Change ☐ Addition

NAME **V/D**
Brian L. Merriman
STREET ADDRESS **11201 Danka Circle N.**
CITY-STATE-ZIP **St Petersburg FL 33716**

3.1 TITLE ☐ Change ☒ Addition

NAME **STV/D**
L. Jean Berry
STREET ADDRESS **11201 Danka Circle N.**
CITY-STATE-ZIP **St Petersburg FL 33716**

4.1 TITLE ☐ Change ☐ Addition

NAME **V**
L. Jean Berry
STREET ADDRESS **11201 Danka Circle N.**
CITY-STATE-ZIP **St Petersburg FL 33716**

5.1 TITLE ☐ Change ☐ Addition

NAME **AS**
NELSEN, KEITH J
STREET ADDRESS **11201 DANKA CIRCLE NORTH**
CITY-STATE-ZIP **ST. PETERSBURG FL 33716**

6.1 TITLE ☐ Change ☐ Addition

NAME **AS**
NELSEN, KEITH J
STREET ADDRESS **11201 DANKA CIRCLE NORTH**
CITY-STATE-ZIP **ST. PETERSBURG FL 33716**

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 change, or on an attachment with an address, with all other like empowered

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/22/99 **(727) 576-6003**

Date Daytime Phone #

CR2E034 (11/98)