

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

FILED

Apr 14 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **G19708** (8)  
1. Corporation Name  
**DIGITAL STANDARD, INC.**



Principal Place of Business <b>2101 W. S.R. 434 SUITE 217 LONGWOOD FL 32778 US</b>	Mailing Address <b>P. O. BOX 952167 P.O. BOX 952167 LAKE MARY FL 32795-2167 US</b>
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2. Principal Place of Business 21 <b>295 Walnut Ridge Circle</b> Suite, Apt #, etc. 22 City & State 23 <b>Lake Mary, Fl.</b> Zip 24 <b>32746</b>	2a. Mailing Address 26 <b>P.O. Box 15348</b> Suite, Apt #, etc. 27 City & State 28 <b>Tallahassee, Fl.</b> Zip 29 <b>32317-5348</b>	Country 25 <b>USA</b> Country 30 <b>USA</b>
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3. Date Incorporated or Qualified <b>01/21/1983</b>	3a. Date of Last Report <b>04/08/1996</b>
4. FEI Number <b>59-2261061</b>	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent  
**FINN, RAYMOND R.  
2101 WEST STATE ROAD 434  
SUITE 217  
LONGWOOD FL 32746**

10. Name and Address of New Registered Agent  
81 Name  
**Finn, Raymond R.**  
82 Street Address (P.O. Box Number is Not Acceptable)  
**295 Walnut Ridge Circle**  
83  
84 City  
**Lake Mary**  
85 Zip Code  
**FL 32746**

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 **Raymond R. Finn, President**

4-7-97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>PSTD</b>	1.1 TITLE	<b>PSTD</b>
NAME	<b>FINN, RAYMOND R</b>	1.2 NAME	<b>Finn, Raymond R.</b>
STREET ADDRESS	<b>223 PEPPERTREE COURT</b>	1.3 STREET ADDRESS	<b>295 Walnut Ridge Circle</b>
CITY-ST-ZIP	<b>LAKE MARY FL</b>	1.4 CITY-ST-ZIP	<b>Lake Mary, FL. 32746</b>
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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: **Raymond R. Finn, Pres.**

904-309-0619

CR2E034 (9/96)