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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # HOESEO

Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90125 028 ***150.00

1. Corporation DIGITAL,											
Principal Place	of Business	Mailing	Address								
516 N "W" STREET 516 N "W" STREET											
PENSACOLA FL 32505 PENSACOLA FL 32505							DO NOT WRITE IN THIS SPACE				
							3. Date Incorporated or Qualifed 05/24/1984				}
_		10- 44					4. FEI Number			Applied	For
— ·	ace of Business	\vdash	iling Address		-		59-2413369			Not App	
21	# -1-	26	ite, Apt. #, etc.				33 24 10000			Additi	
Suite, Apt.	#, etc.	27	ite, Apt. #, etc.				5. Certificate of Status Desired		•	Require	
22 City & State	a		y & State				6. Election Campaign Financing		\$5.0	0 мау	Be
23		28	•				Trust Fund Contribution			d to Fe	
Zip	Country	Zip	·	Countr	у		8. This corporation owes the current ye	ar Intar	ngible		
24	25 29 3			30			Personal Property Tax.		Yes	ΠN	lo
- 1	9. Name and Address of Current	Registere	d Agent				10. Name and Address of New Regist	tered A	gent		
0770	INCLASE BUICTON C			8	Name						
STRUBHAR, BURTON E.				8	2 Street	Addre	ass (P.O. Box Number is Not Acceptable)	_			$\neg \neg$
4300 BAYOU BLVD.											
PENS	SACOLA FL 32503			8	3						
				8	4 City		, <u> </u>	FL	85 Z	ip Code	
11 Pureuant	to the provisions of Sections 607 0502	and 607 1	508 Florida Statutes	s, the abo	ve-named	corpo	pration submits this statement for the purpo	se of c	hanging	its regi	stered
office or n	egistered agent, or both, in the State of m familiar with, and accept the obligat	if Florida S	Such change was aut	inonzea b	v the cort	ocation	n's board of directors. I hereby accept the	appoint	ment as	registe	red
SIGNATURE							D	ATE			\
40	Signature, typed or printed name of registered agent OFFICERS ANI			T 13.	ent signature	required	when reinstating) ADDITIONS/CHANGES TO OFFICER		DIREC	TORS	N 12
12.	TSD OFFICERS AND	DIRECTO	☐ DELETE	1.1 TITLE		Τ_			Chang		Addition
	HAYES, FLORENCE M.			1.2 NAME							1
NAME	2912 HILLCREST AVE			1.3 STREET ADDRESS							
STREET ADDRESS	PENSACOLA FL			1.4 CITY-ST-ZIP							
CITY-ST-ZIP TITLE	PDC DELETE		•	2.1 TITLE				Chang	ge [Addition	
	HAYES, FRED J.		E	2.2 NAME							
NAME STREET ADDRESS	A CALL TO A COMPANY AS IN			i i	Et address	,					1
CITY-ST-ZIP	PENSACOLA FL			2. 4 CITY						•	- 1.
TITLE			DELETE	3.1 TITLE		1			Chang	ge [Addition
NAME				3.2 NAME	:						
STREET ADDRESS				3.3 STRE	ET ADDRESS	;					
CITY-ST-ZIP				3.4. CITY	ST-ZIP						
TITLE			☐ DELETE	4.1 TITLE			•		Chan	3e [Addition
NAME				4, 2 NAM	E						}
STREET ADDRESS				4.3 STRE	ET ADDRESS	3					
CITY-ST-ZIP				4.4 CITY	ST-ZIP						
TITLE			☐ DELETE	5.1 TITLE					Chan	ge [Addition
NAME				5.2 NAMI	į						1
STREET ADDRESS					ET ADDRESS	3					ļ
CITY-ST-ZIP				5.4 CITY							7 A 4 400 =
TITLE			☐ DELETE	6.1 TTTLE			•		☐ Chan	ge L	Addition
NAME				6.2 NAM							
STREET ADDRESS				•	ET ADORESS	۱"					
CITY ST 710	I			6.4 CITY	ST-ZIP	1					i

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 suppliemental 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, with all other like empowered.

SIGNATURE: