

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

FILED  
Apr 28 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
---	---	---

DOCUMENT # **H70608** (5)

1. Corporation Name

**SPECIAL DATA PROCESSING CORPORATION**

Principal Place of Business

Mailing Address

**16120 U.S. 19 NORTH  
CLEARWATER FL 34624**

**16120 U.S. 19 NORTH  
CLEARWATER FL 34624-6862**



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>08/09/1985</b>		3a. Date of Last Report <b>05/02/1996</b>	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		4. FEI Number <b>59-2570945</b>		Applied For <input type="checkbox"/> Not Applicable	
22 City & State		27 City & State		5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>	
23 Zip		28 Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
24 <b>33764</b>		25		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

**HOOD, WILLIAM H., III  
16120 U.S. 19 NORTH  
CLEARWATER FL 34624**

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  
**33764**

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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	PD
NAME	HOOD, WILLIAM HALL, III	1.2 NAME	Hood, William Hall, III
STREET ADDRESS	1461 MAHOGANY LANE	1.3 STREET ADDRESS	3962 Tarian Court
CITY-ST-ZIP	PALM HARBOR FL	1.4 CITY-ST-ZIP	Palm Harbor, FL 34684
TITLE	VPD	2.1 TITLE	EVPSD
NAME	ROMANOW, RANDALL	2.2 NAME	Romanow, Randall
STREET ADDRESS	17744 LONG POINT DRIVE	2.3 STREET ADDRESS	500 N. Bayshore Boulevard
CITY-ST-ZIP	REDINGTON SHORES FL	2.4 CITY-ST-ZIP	Clearwater, FL 34619
TITLE	STD	3.1 TITLE	VPD
NAME	HOOD, JR., WILLIAM HALL	3.2 NAME	Anderson, David W.
STREET ADDRESS	1413 K ST N.W.	3.3 STREET ADDRESS	2618 Cove Cay Drive, #807
CITY-ST-ZIP	WASHINGTON DC	3.4 CITY-ST-ZIP	Clearwater, FL 34620
TITLE		4.1 TITLE	VPD
NAME		4.2 NAME	Capito, J. Michael
STREET ADDRESS		4.3 STREET ADDRESS	1706 Captiva Drive
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Oldsmar, FL 34677
TITLE		5.1 TITLE	VP
NAME		5.2 NAME	Juhl, Ginny
STREET ADDRESS		5.3 STREET ADDRESS	1436 Ambassador Drive
CITY-ST-ZIP		5.4 CITY-ST-ZIP	Clearwater, FL 34624
TITLE		6.1 TITLE	VP
NAME		6.2 NAME	Morris, Alan
STREET ADDRESS		6.3 STREET ADDRESS	1772 Arabian Lane
CITY-ST-ZIP		6.4 CITY-ST-ZIP	Palm Harbor, FL 34685

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 registered agent 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:

*David W. Anderson*  
David W. Anderson  
Vice President/Director

C00 4/18/97 (813) 535-0205

CR2E034 (9/96)

Attachment to 1997 CORPORATION ANNUAL REPORT for  
SPECIAL DATA PROCESSING CORPORATION - Document # H70608 (5)

Continuation of 13. Additional Officers and Directors:

Title: VP  
Name: Gallicano, Robert  
Street Address: 1928 Wolf Laurel Drive  
City-St-Zip: Sun City Center, FL 33573

Title: VP  
Name: McGathey, Cynthia  
Street Address: 10103 Tarpon Drive  
City-St-Zip: Treasure Island, FL 33736

Title: VP  
Name: Crittenden, James  
Street Address: 2018 Moss Court  
City-St-Zip: Palm Harbor, FL 34683

Title: VP  
Name: Surette, Susane  
Street Address: 3166 Glenridge Drive  
City-St-Zip: Palm Harbor, FL 34685