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 9:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **J02466** **(7)**

1. Corporation Name
KEARNEY SYSTEMS, INC.

Principal Place of Business	Mailing Address
604 COURTLAND ST., STE. 160 ORLANDO FL 32806-1465	604 COURTLAND ST., STE. 160 ORLANDO FL 32806-1465

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	3a. Date of Last Report
03/03/1986	05/01/1994

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 / County 25	Zip 29 / County 30

4. FEI Number **59-2673208** ☐ 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 has filed or elected to file under s. 1362 of Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
GRIMM, WILLIAM A., ESQ BOROUGHS, GRIMM & BENNETT 201 E PINE ST, STE 500 ORLANDO FL 32801	81 Name 82 Street Address (P.O. Box Number is Not Acceptable): AKERMAN, SENTERFITT AND EDISON, P.A. 83: 255 S. ORANGE AVE. 84 City: ORLANDO FL 85 Zip Code: 32801

11. Pursuant to the provisions of Sections 607.1005 and/or 617.1905, 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

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS (A-Z)
TITLE	PSD	☐ Change ☐ Addition
NAME	KEARNEY, BOB	
STREET ADDRESS	933 RED FOX ROAD	
CITY-ST-ZIP	ALTAMONTE SPRINGS FL	ZIP: 32714
TITLE	D	☐ Change ☐ Addition
NAME	GRIMM, WILLIAM A.	
STREET ADDRESS	201 E. PINE ST., STE 500	DELETE MR. GRIMM AS A DIRECTOR
CITY-ST-ZIP	ORLANDO FL	
TITLE	D	☐ Change ☐ Addition
NAME	HERBERT, G. ARTHUR	
STREET ADDRESS	1061 MAITLAND CENTER COMMONS	
CITY-ST-ZIP	MAITLAND FL	ZIP: 32751
TITLE	D	☐ Change ☐ Addition
NAME	NOE, THEODORE H	
STREET ADDRESS	8090 S A1A HWY	
CITY-ST-ZIP	MELBOURNE BEACH FL	ZIP: 32951
TITLE	V	☐ Change ☐ Addition
NAME	KOLLER, JAMES M	
STREET ADDRESS	2804 SUMMER BROOKE WAY	
CITY-ST-ZIP	CASSELBERRY FL	ZIP: 32707
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

14. I/We hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemptions 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 above, or on an attachment with an blank, as such.

SIGNATURE: James M. Koller JAMES M. KOLLER 5-1-95 407/740-5220
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0085797 CP