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 APR 28 AM 10:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # J04099 (4)

1. Corporation Name
TASK INC.

TASK870 346232036 1694 01/10/95
NOTIFY SENDER OF NEW ADDRESS
TASK INC
3824 CATTAIL MARSH CT APT 247
PALM HARBOR FL 34684-4339

Principal Place of Business
~~1878 PRINCETON DR~~
~~CLEARWATER FL 34625~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	3a. Date of Last Report
03/14/1986	04/05/1994

2. Principal Place of Business
21 3824 CATTAIL MARSH CT
22 Suite, Apt. #, etc 247
23 City & State PALM HARBOR
24 Zip 34684
25 Country PINELLAS

2a. Mailing Address
26 3824 CATTAIL MARSH CT
27 Suite, Apt. #, etc 247
28 City & State PALM HARBOR
29 Zip 34684
30 Country PINELLAS

4. FEI Number 59-2641771 ☐ 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 liability for intangible tax under § 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

~~ZECKLER, LISSETTE~~
~~1878 PRINCETON DR~~
~~CLEARWATER FL 34625~~

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable) 3824 CATTAIL MARSH CT #247
83
84 City PALM HARBOR FL 85 Zip Code 34684

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	DP	11 TITLE	DP	☒ Change ☐ Addition
NAME	ZECKLER, JOHN L	12 NAME	ZECKLER, JOHN L.	
STREET ADDRESS	~~1878 PRINCETON DR~~	13 STREET ADDRESS	3824 CATTAIL MARSH CT #247	
CITY ST ZIP	~~CLEARWATER FL~~	14 CITY ST ZIP	PALM HARBOR, FL 34684	
TITLE	ST	21 TITLE	ST	☒ Change ☐ Addition
NAME	ZECKLER, LISSETTE	22 NAME	ZECKLER, LISSETTE	
STREET ADDRESS	~~1878 PRINCETON DR~~	23 STREET ADDRESS	3824 CATTAIL MARSH CT #247	
CITY ST ZIP	~~CLEARWATER FL~~	24 CITY ST ZIP	PALM HARBOR, FL 34684	
TITLE	T	31 TITLE	T	☒ Change ☐ Addition
NAME	ZECKLER, JOAN M	32 NAME	ZECKLER, JOAN M.	
STREET ADDRESS	~~1878 PRINCETON DR~~	33 STREET ADDRESS	3824 CATTAIL MARSH CT #247	
CITY ST ZIP	~~CLEARWATER FL~~	34 CITY ST ZIP	PALM HARBOR, FL 34684	
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY ST ZIP		44 CITY ST ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY ST ZIP		54 CITY ST ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY ST ZIP		64 CITY ST ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: J Zeckler JOHN L. ZECKLER 4/15/95 8137854805
SIGN HERE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
PRESIDENT

0960637 CP