

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J04099 (4)

1. Corporation Name
TASK INC.



Principal Place of Business

3824 CATTAIL MARSH CT.
247
PALM HARBOR FL 34684
US

Mailing Address

3824 CATTAIL MARSH CT.
247
PALM HARBOR FL 34684
US

3. Date Incorporated or Qualified
03/14/1986

3a. Date of Last Report
04/28/1995

2. Principal Place of Business

21 2306 CUMBERLAND CR.

2a. Mailing Address

26 2306 CUMBERLAND CR

4. FEI Number
59-2641771

Applied For
Not Applicable

22 Suite, Apt. #, etc.
106

27 Suite, Apt. #, etc.
106

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

23 City & State
CLEARWATER, FL

28 City & State
CLEARWATER, FL

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

24 Zip
34623

29 Zip
34623

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

ZECKLER, LISSETTE
3824 CATTAIL MARSH CT #247
PALM HARBOR FL 34684

10. Name and Address of New Registered Agent

81 Name LISSETTE ZECKLER
82 Street Address (P.O. Box Number is Not Acceptable)
2306 CUMBERLAND CR.
83 APT 106
84 City CLEARWATER FL 85 Zip Code 34623

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 LISSETTE ZECKLER, SEC. TREASURER Lissette Zeckler DATE 4/14/96

Signature, type or printed name of registered agent and the corporation.

Signature, type or printed name of registered agent and the corporation.

DATE

12. OFFICERS AND DIRECTORS

TITLE DP
NAME ZECKLER, JOHN L
STREET ADDRESS 3824 CATTAIL MARSH CT. #247
CITY-ST-ZIP PALM HARBOR FL

☐ DELETE

TITLE ST
NAME ZECKLER, LISSETTE
STREET ADDRESS 3824 CATTAIL MARSH CT. #247
CITY-ST-ZIP PALM HARBOR FL

☐ DELETE

TITLE T
NAME ZECKLER, JOAN M
STREET ADDRESS 3824 CATTAIL MARSH CT. #247
CITY-ST-ZIP PALM HARBOR FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE SAME
12 NAME SAME
13 STREET ADDRESS 2306 CUMBERLAND CR. # 106
14 CITY-ST-ZIP CLEARWATER, FL 34623

☐ Change ☐ Addition

21 TITLE SAME
22 NAME SAME
23 STREET ADDRESS 2306 CUMBERLAND CR. # 106
24 CITY-ST-ZIP CLEARWATER, FL 34623

☐ Change ☐ Addition

31 TITLE VICE PRESIDENT
32 NAME JOHN M ZECKLER
33 STREET ADDRESS 2306 CUMBERLAND CR. # 106
34 CITY-ST-ZIP CLEARWATER, FL 34623

☒ Change ☐ Addition

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

☐ Change ☐ Addition

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

☐ Change ☐ Addition

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

☐ Change ☐ Addition

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)(k), 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: JOHN L. ZECKLER 4/14/96 813 724 2901
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR PRESIDENT

CR2E034 (12/95)