'FILE NOW: FILING FEE AFTER MAY 1

PROFIT CORPORATION ANNUAL REPORT



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT #

J30864

(9)

NATIONAL CONSORTIUM RESEARCH CORPORATION, INC.

Principal Place of Business	Mailing Address			
P.O. BOX 2129 WINTER PARK FL \$2790	P.O. BOX 2129 WINTER PARK FL 32780-2129			
B. Delayland Discord During				
2. Principal Place of Business 180 So. Knowles Ave.	28. Mailing Address			

FILED May 06 1997 8:00am Secretary of State



					3. Date Incorporated or Qualified 3	a. Date of Last Report	
					08/28/1986	05/01/1996	
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Applied For	
21 180 So. Knowles Ave. 26					59-2710213	Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.		***************************************			\$8.75 Additional		
22 Suite 3 27					5. Certificate of Status Desired	Fee Required	
City & State City & State					6. Election Campaign Financing	\$5.00 May Be	
23 Winter Park, FL 28					Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Cour	ntry	8. This corporation has liability for intar		
24 32789	25	29	30		· · · · · · · · · · · · · · · · · · ·	es No	
	9. Name and Address of Curre		1001		10. Name and Address of New Registe		
COL	LISON, HARRY W			81 · Name			
	PARK AVE SOUTH		ļ				
104	TARK AVE SOUTH			Stron Address (P.O. Box Number is Not Acceptable) 180 So. Knowles Ave.			
			Ļ	83	0 50. Miowies Ave.		
WIN	TER PARK FL 32789			👸 Sui	te 3		
•			-	84 Clibrin	ter Park	EI 85 32789	
11. Pursuant t	to the provisions of Sections 607.05	02 and 607.1508, Florida Statul	les, the ab	ove-named	corporation submits this statement for the purpo	ose of changing its registered	
agent. I a	m familiar with, and accept the oblig	gations of, Section 607.0505, Fi	lorida Statu	i by the corp ites:	corporation stantists this statement for the purple poration's board of directors. Thereby accept the	u appointment as registered	
SIGNATURE							
	Signature, typed or printed name of registered a	gent and title it applicable. (NO)	lf: Registered	Agent signature	required when reinstating)	ATE	
12.	OFFICERS AN	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS		
TITLE	DPS	☐ DELETE	1.1 111	LE		Change Addition	
NAME	WOOD, PHILIP F.		1.2 NA	MÉ			
STREET ADDRESS	154 PARK AVE SOUTH		1.3 ST	REET ADDRESS	180 So. Knowles Ave. Su	ite 3	
CITY-ST-ZIP	WINTER PARK FL		1.4 CU	Y-ST-7IP	180 So. Knowles Ave., Su: Winter Park, FL 32789		
TITLE	DVT	DELETE	2 1 TIT			Change Addition	
NAME	COLLISON, HARRY W., JR.		2.2 NA				
STREET ADDRESS	154 PARK AVE SOUTH				180 So. Knowles Ave., Su:	i o	
t t				REFT ADDRESS	Winter Davis Dr. 20700	ite 3	
CITY-ST-ZIP	WINTER PARK FL	Dourt		IY-ST-ZIP	Winter Park, FL 32789		
TITLE		☐ DELETE	3 1 1 11			Change Addition	
NAME			. 3.2 NAI	ME			
STREET ADDRESS			3.3 \$18	HEET ADDRESS			
CITY-ST-ZIP			3 4. CIT	Y-ST-ZIP			
TITLE		☐ DEFEIE	4.1 701	LE		Change Addition	
NAME			4. 2 NA	ME			
STREET ADDRESS			4.3 STA	KEET ADDRESS			
CITY-ST-ZIP				Y - S1 - 7IP			
TITLE	*	DELETE	5.1 1111			Change Addition	
NAME			5.2 NA			Change Rubillo	
			1				
STREET ADDRESS				REE1 ADDRESS			
CITY-ST-ZIP		T RAINTE		Y - ST - ZIP			
TITLE		DELETE	6.1 T(1)	.E		Change Addition	
NAME			6.2 NA	V E			
STREET ADDRESS			6.3 STE	REET ADDRESS			

I do hereby certify that the information supplied with this filling 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 eath; 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.