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 PM 3:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **J40231** **(9)**

1. Corporation Name
ERUDITE, INC.

Principal Place of Business	Mailing Address
~~2498 N.E. 18TH LANE~~ ~~JENSEN BEACH FL 34957~~	~~2498 N.E. 18TH LANE~~ ~~JENSEN BEACH FL 34957~~
3773 Central ave St Petersburg FL 33713	3773 Central Ave St Petersburg FL 33713

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/23/1986
3a. Date of Last Report: 06/06/1994

2. Principal Place of Business	2a. Mailing Address
21 3773 Central Ave	26 3773 Central Ave
Suite, Apt. #, etc. 22 A730	Suite, Apt. #, etc. 27 Suite A730
City & State 23 St Petersburg FL	City & State 28 St Petersburg FL
Zip / Country 24 33713 / 25 USA	Zip / Country 29 33713 / 30 USA

4. FEI Number: 59-2727914 ☐ 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 S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
~~REED, BARBARA T.~~ ~~2498 N.E. 18TH LANE~~ ~~JENSEN BEACH FL 34957~~	81 Name: Jack M Winebrenner 82 Street Address (P.O. Box Number is Not Acceptable): 3773 Central Ave 83 84 City: St Petersburg FL **FL** 85 Zip Code: 33713

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] Jack M Winebrenner 4/27/95
(Typed or printed name of registered agent and title if officer or director) (NOTE: Registered Agent signature required when reinstating) (DATE)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	11 TITLE	V/D	☒ Change ☐ Addition
NAME	ROSTOCIL, MICHAEL DAVID	12 NAME		
STREET ADDRESS	2498 NE 18TH LN	13 STREET ADDRESS	3773 Central Ave #R730	
CITY ST ZIP	JENSEN BCH FL	14 CITY ST ZIP	St Petersburg FL 33713	
TITLE	VP	21 TITLE		☐ Change ☐ Addition
NAME	HUTCHINS, DAVID	22 NAME		
STREET ADDRESS	4327 TURNEY RD	23 STREET ADDRESS		
CITY ST ZIP	MADISON OH	24 CITY ST ZIP		
TITLE		31 TITLE	P	☐ Change ☒ Addition
NAME		32 NAME	Jane Carol Ramsey	
STREET ADDRESS		33 STREET ADDRESS	3773 Central Ave #R730	
CITY ST ZIP		34 CITY ST ZIP	St Petersburg FL 33713	
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		

6/12

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: Michael A. Rostocil Michael Rostocil 4/27/95 813/327-1256
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Telephone Number)

0370102 CP