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 # **J40231**

(9)

1. Corporation Name

ERUDITE, INC.

Principal Place of Business

3773 CENTRAL AVE
SUITE A730
ST PETERSBURG FL 33713
US

Mailing Address

3773 CENTRAL AVE
SUITE A730
ST PETERSBURG FL 33713
US

2. Principal Place of Business

21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address

26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

3. Date Incorporated or Qualified: **10/23/1986**

3a. Date of Last Report: **05/01/1995**

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

WINEBRENNER, JACK M.
3773 CENTRAL AVE
ST PETERSBURG FL 33713

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Section 607.0502 and 617.1505, 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 _____ DATE _____

12. OFFICERS AND DIRECTORS

TITLE	VD	☐ DELETE
NAME	ROSTOCIL, MICHAEL DAVID	
STREET ADDRESS	3773 CENTRAL AVE #R730	
CITY-ST-ZIP	ST PETERSBURG FL	
TITLE	VP	☐ DELETE
NAME	HUTCHINS, DAVID	
STREET ADDRESS	4327 TURNEY RD	
CITY-ST-ZIP	MADISON OH	
TITLE	P	☐ DELETE
NAME	RAMSEY, JANE CAROL	
STREET ADDRESS	3773 CENTRAL AVE #R730	
CITY-ST-ZIP	ST PETERSBURG FL	
TITLE	S	☐ DELETE
NAME	MARK A. JOINER	
STREET ADDRESS	2115 KING ST.	
CITY-ST-ZIP	SAN LUIS OBISPO, CA. 93401	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	Secretary	☐ Change ☒ Addition
4.2 NAME	Mark A Joiner	
4.3 STREET ADDRESS	2115 King St	
4.4 CITY-ST-ZIP	San Luis Obispo CA 93401	
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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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 D. Rostocil Michael D Rostocil 3/28/96 813/327-1256

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — DAYTIME TELEPHONE NUMBER