

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jul 27, 1999 8:00 am
Secretary of State

07-27-1999 90025 047 ***150.00

DOCUMENT # J46369

1. Corporation Name
MODIS, INC.

Principal Place of Business

54 MARINA ROAD
LAKE WYLIE SC 29710
US

Mailing Address

177 CROSSWAYS PARK DR
WOODBURY NY 11797
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/10/1986

4. FEI Number

65-0000600

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 owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 1 INDEPENDENT DR.

Suite, Apt. #, etc.

22 City & State

23 JACKSONVILLE, FL.

Zip County

24 32202 25

2a. Mailing Address

26 1 INDEPENDENT DR.

Suite, Apt. #, etc.

27 City & State

28 JACKSONVILLE, FL.

Zip County

29 32202 30

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

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 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

TITLE ☐ DELETE

NAME PAYNE, TIMOTHY
STREET ADDRESS ONE INDEPENDENT DRIVE
CITY-ST-ZIP JACKSONVILLE FL 32202

TITLE ☐ DELETE

NAME DEWAN, DEREK E
STREET ADDRESS ONE INDEPENDENT DRIVE
CITY-ST-ZIP JACKSONVILLE FL 32202

TITLE ☐ DELETE

NAME ABNEY, MICHAEL D
STREET ADDRESS ONE INDEPENDENT DRIVE
CITY-ST-ZIP JACKSONVILLE FL 32202

TITLE ☐ DELETE

NAME MAYO, MARC M
STREET ADDRESS ONE INDEPENDENT DRIVE
CITY-ST-ZIP JACKSONVILLE FL 32202

TITLE ☒ DELETE

NAME CALABRO, ROBERT
STREET ADDRESS 177 CROSSWAYS PARK DR
CITY-ST-ZIP WOODBURY NY 11797

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 ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

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

14. I hereby certify that the information supplied with this filing 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)



596610-90025-47
J46369



One Independent Drive • Jacksonville, Florida 32202-5060
Telephone: 904-360-2000 • Facsimile: 904-360-2814
www.modispro.com

July 6, 1999

Re: Profit Corporation Annual Report – Modis, Inc.

Florida Department of State
Katherine Harris - Secretary of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Dear Ms. Harris:

We are requesting an abatement of the \$400 penalty perscribed in the Profit Corporation Annual Report Packet. The notification of any due funds was received too late to facilitate timely filing. The delay in receiving the notification was caused by the consolidation of functions into our corporate headquarters in Jacksonville. We are submitting the required annual fee of \$150 with the annual report.

Please send any additional requests to me at 1 Independent Drive, Jacksonville, FL 32202 and call me with any questions at 904-360-2704.

Thank you for your consideration on the abatement of the penalty.

Sincerely,

Gerald Robinson
Tax Director

S96610-90025-47
J 46 369

Modis Inc.

Officers:

Chief Executive Officer/Chairman
Derek E. Dewan

1 Independent Dr. Jacksonville, FL 32202

Vice President /Treasurer
Michael D. Abney

1 Independent Dr. Jacksonville, FL 32202

President
Timothy D. Payne

1 Independent Dr. Jacksonville, FL 32202

Secretary
Marc M. Mayo

1 Independent Dr. Jacksonville, FL 32202

Directors:

Derek E. Dewan
Michael D. Abney
Marc M. Mayo

1 Independent Dr. Jacksonville, FL 32202

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