FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995 5-11-95 B-6704

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

APPROVED AND FILED
95 MAY 11 PM 8:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # J49856 (4)

1. Corporation Name

PRIDE PRINTING, INC.

Principal Place of Business	Mailing Address
1307 SANTA BARBARA BLVD CAPE CORAL FL 33991 US	1307 SANTA BARBARA BLVD CAPE CORAL FL 33991 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 1307 SW Santa Barb. Pl.	26 1307 SW Santa Barb. Pl.
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: Cape Coral, Florida	28 City & State: Cape Coral, Florida
24 Zip: 33991 — 25 County: LEE	29 Zip: 33991 — 30 County: LEE

3. Date Incorporated or Qualified: 01/01/1987
3a. Date of Last Report: 04/28/1994
4. FEI Number: 59-2717819 — ☐ 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

WILLIAMS, DON
1307 SANTA BARBARA BLVD.
CAPE CORAL FL 33914

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable): 1307 SW Santa Barb. Pl.
83
84 City: Cape Coral FL 85 Zip Code: 33991

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

12. OFFICERS AND DIRECTORS

Field	Entry
TITLE	PD
NAME	WILLIAMS, DON
STREET ADDRESS	1307 SW SANTA BARBARA PL
CITY-ST-ZIP	CAPE CORAL FL
TITLE	D
NAME	SPILLMAN, GEORGE
STREET ADDRESS	811 CROSS TIMBERS DRIVE
CITY-ST-ZIP	LOUISVILLE TX
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ 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)(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: Don A. Williams — Don A. Williams 5/4/95 813-458-2000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Daytime Phone #