## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

J83492 DOCUMENT # 1. Corporation Name

(5)

	ED SERVICE CENTER,							
Principal Place of	Business	Mailing Address						
1369 SAGE DRI		1369 SAGE DRIVE Dunedin Fl 34698						
DOILE III V = 3					3. Date Incorporated or Qualified 06/24/1987	3a. Date 02	of Last <b>/08/1</b>	
		2a. Mailing Address			4. FEI Number		TL.	Applied For
Principal Place of Business		26			59-2836475			Not Applicable
Suite, Apt. #,	etc.	Suite, Apt. #. etc.			5. Certificate of Status Desired			5 Additional a Required
City & State		City & State			Election Campaign Financing     Trust Fund Contribution			00 May Be ded to Fees
Zıp	Country	<b>28</b>	Country		8. This corporation has liability for	intangible ta	x under	s 199.032,
]	25	29	30		Florida StatutesYes  10. Name and Address of New F		Agent	
	9. Name and Address of Cu	rrent Registered Agent	B1 Nan		IV. Name and Address of New 1			
			1 1					····
HAGAN, I	MARK		82 Street Ad		dress (P.O. Box Number is Not Acceptable)			
1369 SAC	GE DRIVE		83			,		
DUNEDIN	N FL 34698		03				12-1	7. Codo
			<b>84</b> City			FL	85	Zip Code
11. Pursuant to or registered familiar with	the provisions of Sections 607.0 ad agent, or both, in the State of h, and accept the obligations of,	0502 and 607.1508, Florida Statut Florida, Such change was authoriz Section 607.0505, Florida Statutes	es, the above named red by the corporation	d corpor n's boar	ation submits this statement for the purify of directors. Thereby accept the app	urpose of cha cointment as	anging I registe	ts registered officed agent. Lam
or registered familiar with	id agent, or both, in the Glade or n, and accept the obligations of,	Section 607,0505, Florida Statutes	are the performance trained		Total goodates	DATE.	•	
or registered familiar with SIGNATURE	id agent, or both, if the state of, and accept the obligations of, superior, by edial partial are correspondent.  OFFICE RS	Soction 607.0505, Florida Statutes  COLLEGE TO SERVICE STATE	th Englished April Survet			DATE FICERS AND	•	DIORS IN 12
or registered familiar with SIGNATURES	and accept the obligations of, and accept the obligations of, supplies by each partial are of registering OFFICERS	Section 607,0505, Florida Statutes	11. Facilities of April Superior 13.		Total goodates	DATE FICERS AND	DIREC	DIORS IN 12
or registered familiar with SIGNATURES	n, and accept the obligations of, Supplied by Ratio partial are consistented.  OFFICERS  PD  HAGAN, MARK	Soction 607.0505, Florida Statutes  COLLEGE TO SERVICE STATE	11. The perfect of April 1921 of 13.  1 1 THE 12 NAME	ine tempa	Total goodates	DATE FICERS AND	DIREC	DIORS IN 12
or registered familiar with SIGNATURE 5  12.  TITLE VAME	od agent, or both, if the sale of and accept the obligations of open of the obligations o	Soction 607.0505, Florida Statutes  COLLEGE TO SERVICE STATE	11. To perferred A year regree  13.  1 1 HULF  1 2 NAME  1 3 STREEL ADDR	ine tempa	Total goodates	FICERS AND	D DIREC	DIORS IN 12 ge 🔲 Addition
or registered familiar with Signature 5  12.  Title VAME STREET ADDRESS CHY-ST-ZIP	od agent, or both, if the obligations of, and accept the obligations of, or produced by the obligations of t	Soction 607.0505, Florida Statutes  Land the Paper and Market Statutes  S AND DIRECTORS  DELETE	11. The perfect of April 1921 of 13.  1 1 THE 12 NAME	ine tempa	Total goodates	FICERS AND	DIREC	DIORS IN 12 ge 🔲 Addition
or registerer familiar with SIGNATURE  SITE  SITE STREET ADDRESS CHY-SI-ZIP  TITLE	pd agent, or both, if the obligations of, and accept the obligations of, or person of the obligations of the	Soction 607.0505, Florida Statutes  COLLEGE TO SERVICE STATE	11. The perfect A year suggest 13. 1 1 HHLF 1 2 NAME 1 3 STREET ADDR	ine tempa	Total goodates	FICERS AND	D DIREC	DIORS IN 12 ge Addition
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Or registerer familiar with signature 5  12.  Title	PD HAGAN, MARK 1389 SAGE DRIVE DUNEDIN FL TSD HAGAN, MARIE 1389 SAGE DRIVE	Soction 607.0505, Florida Statutes  S AND DIRECTORS  DELETE	13. 1 THLF 1 2 NAME 1 3 STREEL ADDR 2 4 CHY ST ZIP 2 1 THLE 2 NAME 2 3 STREEL ADDR 2 4 CHY ST ZIP 3 THLE 3 2 NAME 3 3 STREEL ADDR 3 4 CHY ST ZIP 4 THLE	ESS RESS	Total goodates	FICERS AND	O DIREC	DIORS IN 12 ge Addition nge Addition
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14. I do hereby certify that the information supplied with this filing is vokuntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes, I further certify that the information indicated on this annual report or supplemental annual report is true and ancurate and that my signature shall have the same legal effect as if made under certify that the information indicated on this annual report or supplemental annual report is true and ancurate and that my signature shall have the same legal effect as if made under certify that I am an officer or director of the corporation or the receiver or dischedited by the corporation of the receiver of the corporation of the receiver of the corporation of the corporation of the receiver of the corporation of the corporatio LOGAL MARIE HAGAN
SED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6 1 THE

6.2 NAME

63 STHEET ADDRESS

6.4 Cify - S1 - ZIP

STREET ADDRESS

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

DELETE

☐ Change ☐ Addition