FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 May 14 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State **ANNUAL REPORT** Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (4)VETERANS COMPUTER SUPPLY, INC. Principal Place of Business Mailing Address 12772 GINGER DRIVE 12772 GINGER DRIVE JACKSONVILLE FL 32223 JACKSONVILLE FL 32223 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/03/1988 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59**-28**72120 21 26 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 8. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due Jurie 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Martin, kurt e. 12772 GINGER DR. 82 Street Address (P.O. Box Number is Not Acceptable) JACKSONVILLE FL 32223 83 84 City 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, 1 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, typed or printed name of registered agent and title it applicable. (NOTE: Registered Agent signature regulred when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition TITLE 1.1 TITLE MARTIN, KURT E. NAME 1.2 NAME 12772 GINGER DRIVE STREET ADDRESS 1.3 STREET ADDRESS JACKSONVILLE FL CITY-ST-ZIP 1.4 CITY - ST - ZIP ☐ DELETE TITLE 2.1 TITLE Change Addition MARTIN, DOROTHY L. NAME 22 NAME 12772 GINGER DRIVE STREET ADDRESS 23 STREET ADDRESS JACKSONVILLE FL CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE **5.1 TITLE** NAME 5.2 NAME STREET ADDRESS **5 3 STREET ADDRESS** CITY-ST-ZIP 5.4 City-st-7iP ■ DELETE Change Addition TITLE 61 TOLE

Block 12 or Block 13 if changed, or on an attachment with an address. 11 20 00

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

NAME

STREET ADDRESS

CITY-ST-ZIP