

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **K45671** (0)

1. Corporation Name

SECURE DATA, INC.



Principal Place of Business

Mailing Address

**2177 KINGSLEY AVE.
P. O. BOX 2230
ORANGE PARK FL 32067**

**2177 KINGSLEY AVE.
P. O. BOX 2230
ORANGE PARK FL 32067**

3. Date Incorporated or Qualified
11/16/1988

3a. Date of Last Report
07/19/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**STEDFORD, WALTER R.
2039 PARK STREET
JACKSONVILLE FL 32204**

81 Name **Terry G. Croutharmel**
82 Street Address (P.O. Box Number is Not Acceptable) **2177 Kingsley Ave**
83
84 City **Orange Park** FL 85 Zip Code **32073**

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

Terry G. Croutharmel

7-12-96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **DS** ☒ DELETE
NAME **CROUTHARMEL, TERRY G.**
STREET ADDRESS **2177 KINGSLEY AVE. #1**
CITY-ST-ZIP **ORANGE PARK FL**

11 TITLE **P/T/D** ☒ Change ☐ Addition
12 NAME **CROUTHARMEL, TERRY G.**
13 STREET ADDRESS **2177 KINGSLEY AVE, #1**
14 CITY-ST-ZIP **ORANGE PARK, FL 32073**

TITLE **DT** ☒ DELETE
NAME **KUBLBOCK, JOHN J.**
STREET ADDRESS **2177 KINGSLEY AVE. #1**
CITY-ST-ZIP **ORANGE PARK FL**

21 TITLE **V/D** ☐ Change ☒ Addition
22 NAME **MARILYN CROUTHARMEL**
23 STREET ADDRESS **2177 KINGSLEY AVE, #1**
24 CITY-ST-ZIP **ORANGE PARK, FL 32073**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

31 TITLE **S/D** ☐ Change ☒ Addition
32 NAME **LINDA STUCKEY**
33 STREET ADDRESS **2177 KINGSLEY AVE, #1**
34 CITY-ST-ZIP **ORANGE PARK, FL 32073**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

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)(k), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **TERRY G. CROUTHARMEL**

7-12-96

(904) 276-2228

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (3/96)