

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

CORPORATION  
ANNUAL REPORT  
1995



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

APPROVED  
AND  
FILED

95 MAY -1 PM 8: 54

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **K47789** (8)

1. Corporation Name  
**PSCU SERVICE CENTERS, INC.**

Principal Place of Business Mailing Address  
**100 CARILLON PARKWAY, SUITE 300  
P. O. BOX 31216 (TAMPA, FL 33631)  
ST. PETERSBURG FL 33716**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **11/29/1988** 3a. Date of Last Report **03/16/1994**  
4. FEI Number **59-2922309** 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  
7. This corporation has liability for intangible tax under S. 199.032, Florida Statutes  Yes  No

2. Principal Place of Business 2a. Mailing Address  
21 **560 Carillon Pkwy** 26 **PO Box 31216**  
Suite Apt #, etc. Suite, Apt #, etc.  
22 City & State 27 City & State  
23 **St. Petersburg, FL** 28 **Tampa, FL**  
Zip Country Zip Country  
24 **33716** 25 **Pinellas** 29 **33631** 30 **Hillsborough**

9. Name and Address of Current Registered Agent  
**SERLO, DAVE  
100 CARILLON PARKWAY  
SUITE 300  
ST. PETERSBURG FL 33716**

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
**560 Carillon Pkwy**  
83  
84 **St. Petersburg** **FL** 85 Zip Code **33716**

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 of current registered agent and title of new agent

Signature of registered agent (signature required when changing)

DATE

12. OFFICERS AND DIRECTORS	
TITLE	<b>DC</b>
NAME	<b>ELKINS, JOHN</b>
STREET ADDRESS	<b>400 TOWN CENTER</b>
CITY, ST, ZIP	<b>DEARBORN MI</b>
TITLE	<b>D</b>
NAME	<b>WALLING, JOHN</b>
STREET ADDRESS	<b>101 S. BARRANCO</b>
CITY, ST, ZIP	<b>COVINA CA</b>
TITLE	<b>P</b>
NAME	<b>SERLO, DAVID</b>
STREET ADDRESS	<b>100 CARILLON PWY #300</b>
CITY, ST, ZIP	<b>ST. PETERSBURG FL</b>
TITLE	<b>D</b>
NAME	<b>YOKUM, JEAN</b>
STREET ADDRESS	<b>1055 W. MERCURY BLVD.</b>
CITY, ST, ZIP	<b>HAMPTON VA</b>
TITLE	<b>D</b>
NAME	<b>OLSON, BEN</b>
STREET ADDRESS	<b>2000 WESTWOOD DRIVE</b>
CITY, ST, ZIP	<b>WAUSAU WI</b>
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY, ST, ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY, ST, ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY, ST, ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY, ST, ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY, ST, ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 Sections 119.07(4)(a), 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, in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *David Serlo*  
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED AGENT OR DIRECTOR

4-28-96  
1632572-8822