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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995

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

DOCUMENT # K54860 (7)

1. Corporation Name
Florida Residential Reporting SVC, Inc.

Principal Place of Business
5773 Sanibel Captiva Rd
Sanibel, FL 33957
C/o Carolyn Herman

Mailing Address
Same

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/30/88
3a. Date of Last Report: 4/15/94

2. Principal Place of Business
21: 5773 Sanibel Captiva
22: Suite, Apt. #, etc
23: City & State: Sanibel FL
24: Zip: 33957
25: Country: USA

2a. Mailing Address
26: 5773 Sanibel Captiva Rd
27: Suite, Apt. #, etc
28: City & State: Sanibel, FL
29: Zip: 33957
30: Country

4. FEI Number: 59-2940743 ☐ 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, GARY E.
C/O DATAFAX CORP
8902 N. DALE MABRY Hwy #209
TAMPA FL. 33614

10. Name and Address of New Registered Agent
81 Name: CAROLYN HERMAN
82 Street Address (P.O. Box Number is Not Acceptable): 5773 SANIBEL CAPTIVA RD
83
84 City: SANIBEL FL 85 Zip Code: 33957

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: CAROLYN HERMAN — Signature, Typed or printed name of registered agent and title if applicable — NOTE: Registered Agent Signature required when name changes — DATE: 4-7-95

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President, V.P. Sec/Tres. CAROLYN HERMAN 5773 Sanibel Captiva Rd Sanibel, FL 33957	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	☐ Change ☐ Addition 500001513425 -06/15/95--01025--012 ****200.00 ****200.00
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	☐ Change ☐ Addition 500001513425 -06/15/95--01025--013 *****25.00 *****25.00
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DVP Nickerson, Jerry 5773 Sanibel Captiva Rd Sanibel, FL 33957	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP	☐ Change ☐ Addition Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DVP-S Williams, Gary E 126 S. Oregon Ave Tampa, FL. 33606	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP	☐ Change ☐ Addition Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP	☐ Change ☐ Addition RC

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: Carolyn Herman — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date: 4-5-95 — Daytime Phone #: 800 741 7511