## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**FILED** Apr 27 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 # (6) ELECTRONIC RETAIL SYSTEMS, INC. Principal Place of Business Mailing Address C/O RONALD J. LANGLEY C/O RONALD J. LANGLEY 3 SOUTH G STREET 3 SOUTH G STREET PENSACOLA FL 32501 PENSACOLA FL 32501 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/17/1989 2. Principal Place of Business 21 5/6 EL VA 2a. Mailing Address 4. FEI Number Applied For 516 ELVA Street 59-2972337 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Election Campaign Financing \$5.00 May Be -lorida Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible Yes Personal Property Tax due June 30. 9. Name and Address of Current Registered 10. Name and Address of New Registered Agent 61 Name LANGLEY, RONALD J. 3 SOUTH G STREET Street Address (P.O. Box Number is Not Acceptable) 82 PENSACOLA FL 32501 83 84 City 85 Zip Code 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13, DELETE Addition TITLE 1.1 TITLE Change LANGLEY, RONALD J. NAME 1.2 NAME 794 LEE HILL ROAD 811 PANFERO DR. STREET ADDRESS 1.3 STREET ADDRESS milton, FloRIDA 32570 Change PENSACOLA FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE TITLE 2.1 TITLE NAME 22 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-SY-ZIP 2.4 CITY-ST-ZIP DELETE Addition TITLE 3.1 TITLE Change NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZVP 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

14. Thereby certify that the information supplied with this filling 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.

5.1 TITLE

5.2 NAME

6.1 TITLE

62 NAME

**5.3 STREET ADDRESS** 

6.3 STREET ADDRESS

6.4 CITY - ST- ZIP

5.4 CITY-ST-ZIP

DELETE

DELETE

SIGNATURE:

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

8509837973

Change

Change

Addition

Addition

(10/97