

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **L42156** (4)

1. Corporation Name

CENTRAL DATA COMPUTER CENTERS, INC.



Principal Place of Business

Mailing Address

**C/O HENRY GRADY CRUNK, III
6040 GRISSOM PARKWAY, P.O. BOX 2046
TITUSVILLE FL 32781-2046
XXXXXXXXXXXX**

**C/O HENRY GRADY CRUNK, III
6040 GRISSOM PARKWAY, P.O. BOX 2046
TITUSVILLE FL 32781-2046
XXXXXXXXXXXX**

2. Principal Place of Business

2a. Mailing Address

21 **6055 Grissom Pkwy-PO Box 2046**

26 **6055 Grissom Pkwy-PO Box 2046**

3. Date Incorporated or Qualified
01/09/1990

3a. Date of Last Report
03/17/1995

4. FET Number
59-3102118

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 **Titusville, Florida**

28 **Titusville, Florida**

24 Zip

25 Country

29 Zip

30 Country

32781-2046

32781-2046

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CRUNK, HENRY GRADY, III
6040 GRISSOM PARKWAY
TITUSVILLE FL**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent (see item 9 above)

(If 21b, Registered Agent signature required when requested)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

V
**CRUNK, HENRY GRADY, III
38300 OAKHILL DR
TITUSVILLE FL**

TITLE ☐ DELETE

P
**CRUNK, KANDY
3830 OAKHILL DR
TITUSVILLE FL**

TITLE ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

☐ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Kandy Crunk

Kandy Crunk

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/96

Date

407-383-0705

Chartering Phone #

CR2E034 (12/95)