

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

FILED
May 19 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **L72375** (3)
1. Corporation Name
ACTUATION CENTER, INC.



Principal Place of Business 4304 METRIC DRIVE SUITE 101 WINTER PARK FL 32792-6821 US	Mailing Address 4304 METRIC DRIVE SUITE 101 WINTER PARK FL 32792-6821 US
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 05/09/1990	
4. FEI Number 59-2369737	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent BLACKARD, WILLIAM R., JR 112 WEST ADAMS STREET SUITE 1609 JACKSONVILLE FL 32202		10. Name and Address of New Registered Agent 81 Name WILLIAM A. WALKER II 82 Street Address (P.O. Box Number is Not Acceptable) 250 PARK AVE. S. 83 5TH FLOOR 84 City WINTER PARK FL 85 Zip Code 32789	
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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]* (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HOUK, THOMAS L., JR	1.2 NAME	
STREET ADDRESS	2101 PREMIER ROW #101	1.3 STREET ADDRESS	4304 METRIC DRIVE, SUITE 101
CITY-ST-ZIP	ORLANDO FL	1.4 CITY-ST-ZIP	WINTER PARK, FL 32792-6821
TITLE	SVD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HOUK, GAYLE G.	2.2 NAME	
STREET ADDRESS	2101 PREMIER ROW #101	2.3 STREET ADDRESS	4304 METRIC DRIVE, SUITE 101
CITY-ST-ZIP	ORLANDO FL	2.4 CITY-ST-ZIP	WINTER PARK, FL 32792-6821
TITLE	S <input checked="" type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BLACKARD, WILLIAM R JR	3.2 NAME	
STREET ADDRESS	2101 PREMIER ROW #101	3.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing 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 *[Signature]* **4304 METRIC DRIVE, SUITE 101 WINTER PARK, FL 32792-6821**

CR2E034 (10/97)