

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # L88280

(7)

1. Corporation Name

ZIOSK SERVICES, INC.



Principal Place of Business

5600 GULF BOULEVARD
ST. PETERSBURG BEACH FL 33706

Mailing Address

5600 GULF BOULEVARD
ST. PETERSBURG BEACH FL 33706

3. Date Incorporated or Qualified

07/16/1990

3a. Date of Last Report

04/11/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FET Number

59-3018482

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

10. Name and Address of New Registered Agent

FORTUNE, JOAN A.
5600 GULF BLVD.
ST. PETERSBURG BEACH FL 33706

81 Name

Sheryl H. Andrews

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

5600 Gulf Boulevard

83

84 City

St. Petersburg Beach,

FL

85 Zip Code

33706

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 of 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

Sheryl H. Andrews
Signature, typed or printed name of registered agent and the applicable.

Sheryl H. Andrews, Vice President

2/14/96

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

DP
FORTUNE, JOAN A.
5600 GULF BLVD.
ST. PETERSBURG BCH FL

☒ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

DVST
FORTUNE, JEFFREY L.
5600 GULF BLVD.
ST. PETERSBURG BCH FL

☒ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

V
SHERMAN, RICHARD E
5600 GULF BOULEVARD
ST. PETERSBURG BEACH FL 33706

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

VAS
ANDREWS, SHERYL H
5600 GULF BOULEVARD
ST. PETERSBURG BEACH FL 33706

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

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

C/P/AS/D
Richard E. Sherman
5600 Gulf Boulevard
St. Petersburg Beach, FL 33706
V/S/T
Sheryl H. Andrews
5600 Gulf Boulevard
St. Petersburg Beach, FL 33706

300001752100
-03/21/96--01022--030
***200.00

M.M.
3-20-96

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

(813) 5621202

CR2E034 (12/95)