# FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JAN 30 AM 10:00

DOCUMENT # N21087 (4)

1. Corporation Name
FIRST DISCOVERY, INC.

| Principal Place of Business | Mailing Address |
|---|---|
| 6131 5TH ST E<br>BRADENTON FL 34203<br>US | 6131 5TH ST E<br>BRADENTON FL 34203<br>US |

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/10/1987
3a. Date of Last Report: 07/01/1994
4. FEI Number: 59-1743126 — 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status — $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes — Yes / No

| 2. Principal Place of Business | 2a. Mailing Address |
|---|---|
| 21 1st Discovery Inc. | 26 1st Discovery Inc. |
| Suite, Apt. #, etc. 22 6131 5th St E | Suite, Apt. #, etc. 27 6131 5th St E |
| City & State 23 Bradenton, Fl | City & State 28 Bradenton, Fl |
| Zip 24 34203 Country 25 Manatee | Zip 29 34203 Country 30 Manatee |

9. Name and Address of Current Registered Agent

TRALICH CARLA
908 65TH AVE. DR. W
BRADENTON FL 34207

10. Name and Address of New Registered Agent

81 Name: Tralich Carla
82 Street Address (P.O. Box Number is Not Acceptable): 908 65th Ave Dr W
83
84 City: Bradenton FL 85 Zip Code: 34207

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: Carla Tralich (Pres) — 1/13/95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | | |
|---|---|---|---|---|
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | TD<br>TRALICH, DELORES H.<br>908 65TH AVENUE DR.W.<br>BRADENTON FL 34207 | 1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP | TD<br>TRALICH Delores H<br>908 65th Ave Dr. W<br>Bradenton, Fl 34207 | ☐ Change ☑ Addition<br>SAME |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | SD<br>TRALICH, TIMOTHY J.<br>908 65TH AVENUE DR.W.<br>BRADENTON FL 34207 | 2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP | SD<br>Tralich Timothy J<br>908 65th Ave. Dr. W<br>Bradenton, Fl 34207 | ☐ Change ☑ Addition<br>SAME |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | PD<br>TRALICH, CARLA ANN<br>908 65TH AVE. DR. W<br>BRADENTON FL 34207 | 3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP | Pres<br>Tralich CARLA Ann<br>908 65th Ave Dr W<br>Bradenton, Fl 34207 | ☑ Change ☑ Addition<br>SAME |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | 4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | 5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

**SIGNATURE:** Carla Ann Tralich — 1/13/95 — 813-75
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

000220