FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham 💂

Secretary of State DIVISION OF CORPORATIONS

4/11/96(407) 539-2511

1996

DOCUMENT #
1. Corporation Name N95000001688 (9)

DRIVE SMART FLORIDA, INC.

Principal Place of Business 17200 COMMERCE PARK BOULEVARD TAMPA FL 33845		Mailing Address 17200 COMMERCE PARK BOULEVARD TAMPA FL 33645		, , , , , , , , , , , , , , , , , , , ,		
				3. Date incorporated or Qualified 04/06/1995	3a. Date of Last	
2. Principal Place	e of Business	2a. Mailing Address		4. FEI Number		Applied For
	iplomat Circle	26 5405 Diple	omat Circle	59-3314899		Not Applicable
Suite, Apt. #, etc. Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
2 Suite 154 City & State		City & State		6. Election Campaign Financing		
3Orlando, Florida		28 Orlando, Florida . Zip Country		Trust Fund Contribution 8. This corporation has liability for i	AUU	
Zip 4 3281	Country 0 25 US	29 32810	30 US	Ftorida Statutes	_ Yes □ No	
1 3201	9. Name and Address of Current	Registered Agent		10. Name and Address of New R	egistered Agent	
			81 Name	Fred B. Hagan		
DVORNIK	, DONALD F		82 Street Add	Fred B. Hagan tress (P.O. Box Number is Not Acceptab	ile)	
17200 COMMERCE PARK BOULEVARD			5405	<u>Diplomat Circle</u>		
tampa f	L 33645		Suit	e 154		
-			84 City	<u>.</u>		Zip Code 32810
		and 617 1500 Florida Statute	or 1a	at a standard programment for the must	roose of changing its	registered office
 Pursuant to or registere 	o the provisions of Sections 617.0002 and agent, or both, in the State of Florida	a. Such change was authorize	ed by the corporation's bo	ard of directors. I hereby accept the app	iointment as registere	ed agent. I am
familiar with		617.0503, Florida Statutes.	D. Hawan D	rocident	4/11/96	
SIGNATURE	signature, typed or printed name of registered agent a	nd tipe it applicable. (NO	B. Hagan P TE: Registered Agent eignalure recivi	red when reinstating)		1000 IN 40
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OF	FICERS AND DIRECT	
TITLE	Chairman	DELETE	. 1.1 TITLE			
NAME	Donald F. Dvorn	ik	1.2 NAME			
STREET ADDRESS	17200 Commerce	Park Blvd.	1.3 STREET ADDRESS			
CITY-ST-ZIP	Tampa, FL 3364	7	1.4 CITY-ST-ZIP		☐ Change	e Addition
TITLE	President	DELETE	21 TITLE			_
NAME	Fred B. Hagan		2.2 NAME			
STREET ADDRESS	5405 Diplomat C Orlando, FL 32	ircle, #154	2.3 STREET ADDRESS			
CITY-ST-ZIP	Orlando, FL 32	810 DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE		☐ Change	e 🔲 Addition
TITLE	Director	_	3.2 NAME			
NAME	Karen M. Braeul		3.3 STREET ADDRESS			
STREET ADDRESS	17200 Commerce	Park Blvd.	3.4. CITY - ST - ZIP			
CITY-ST-ZIP TITLE	Tampa, FL 336	DELETE	4.1 TITLE		☐ Chang	e 🔲 Addition
	Director	_	4. 2 NAME	2000017	96112	
NAME STREET ADDRESS	Randy E. Bly	ahara Dira	4.3 STREET ADDRESS	2000017 -04/26/9601	เกิงริักโร๊	
CITY-ST-ZIP	1515 North West		4.4 CITY-ST-ZIP	***61.25		
TITLE	Tampa, FL 3360	DELETE	5 1 TITLE		Chang	ge
NAME	Director		5.2 NAME			
STREET ADDRESS	Louis J. Rinald		5.3 STREET ADDRESS			
CITY-ST-ZIP	702 N. Franklin	1	5.4 CITY-ST-ZIP			ge 🔲 Addition
TITLE	- Tampa, FL - 3360	DELETE	61 TITLE		Chang	ic [] wangan
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			6.4 CITY-SY-ZIP	the examption stated in Castion 44	19 07/3/W Florida St	atutes I further
14 Ldo bereb	by certify that the information supplied	with this filing is voluntarily fur (a) report or supplemental an	nished and does not quali nual report is true and acc	fy for the exemption stated in Section 11 urate and that my signature shall have the this report as required by Chapter 617.	ne same legal effect a	as if made under
				the report to require any		
appears in	n Block 12 or Block 13 if changed, or o	on an attachment with an add	JI 000.		6(407) 53	39-2511

fred B. Hagan