

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

APPROVED  
AND  
FILED  
1997 MAY -1 PM 1:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P27745 (9)

1. Corporation Name  
PHOENIX SYSTEMS GROUP, INC.

Principal Place of Business  
100 SECOND AVENUE SOUTH  
SUITE #1100  
ST. PETERSBURG FL 33701-4338

Mailing Address  
100 SECOND AVENUE SOUTH  
SUITE #1100  
ST. PETERSBURG FL 33701-4338



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified  
01/17/1990

3a. Date of Last Report  
08/12/1996

4. FEI Number  
58-1744015

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

GORDON, ROBERT P  
100 2ND AVE S  
SUITE 1100  
ST PETERSBURG FL 33701

10. Name and Address of New Registered Agent

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 and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DC  
NAME GORDON, ROBERT P.  
STREET ADDRESS 100 2ND AVE S #1100  
CITY-ST-ZIP ST PETERSBURG FL

TITLE PD  
NAME SANDERS, XENOPHON  
STREET ADDRESS 2700 CORDOVA WAY S  
CITY-ST-ZIP ST PETERSBURG FL

TITLE V  
NAME PARISI, LEO  
STREET ADDRESS 9719 LARGO POINT  
CITY-ST-ZIP LARGO FL

TITLE SD  
NAME HENRY, PAUL W  
STREET ADDRESS 91 CROWNSHEIDL ROAD  
CITY-ST-ZIP BROOKLINE MA

TITLE V  
NAME GORDON, VINCENT P.  
STREET ADDRESS 100 2ND AVENUE, SOUT, STE 1100  
CITY-ST-ZIP ST. PETERSBURG FL

TITLE  
NAME GLOSS, DELBERT F., JR  
STREET ADDRESS 100 2ND AVENUE SOUTH, STE 1100  
CITY-ST-ZIP ST. PETERSBURG, FL. 33712

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

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

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

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

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

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

14. I do 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: Paul W. Henry / Paul W. Henry 4/29/97 813/894-8024  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)