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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

1. Corporation Name

P92000008300 (5)

SCOTT CHURCHILL AND ASSOCIATES, INC.

Principal Place of Business Mailing Address 7849 GEORGE ANN ST. 7849 GEORGE ANN ST. WINTER PARK FL 32792 WINTER PARK FL 32782 3. Date incorporated or Qualified 3a. Date of Last Report 11/30/1992 04/27/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 12215 UNIVERSITY BLUE SWIFT 11661 59-3158094 Not Applicable Suite, Apr. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired BOX 113 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be DRLANDO Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s. 199.032, 281 WA USA 25 29 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CHURCHILL, SCOTT R 82 Street Address (P.O. Box Number is Not Acceptable) 7849 GEORGE ANN ST. SWIPT 63 WINTER PARK FL 32792 84 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 obligation of, Section 607.0555. Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) 12 OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change TITLE 1.1 TITLE CHURCHILL, SCOTT R NAME 1.2 NAME 7849 GEORGE ANN ST. STREET ADDRESS 1.3 STREET ADDRESS WINTER PARK FL 32792 CITY-ST-ZIP 1.4 City-ST-ZIP TOTLE ☐ DELÉÌE 2. 1 TITLE Addition NAME 2.2 NAME STREET ADDRESS 23 STREET ADDRESS CITY - ST - ZIP 24 CITY-ST-ZIP THILE DELETE 3.1 TITLE Change Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 34 CHY-ST-ZIP DELETE TITLE 4 1 TITLE Change ☐ Addition 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE 1111 F 5 1 TITLE Channe ☐ Addition NAME 52 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 City-St-ZiP TITLE DELETE 6.1 TITLE [] Change ☐ Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-7IP 64 CITY - ST - ZIP

14. I do hercby 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:

SNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-17-96

4-7-302-053

CR2E034 (12/95)