FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED
95 MAY -1 AM 10:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000029023 (7)**

1. Corporation Name
NATIONAL WORKERS' COMPENSATION SERVICES, INC.

Principal Place of Business	Mailing Address
106 HALL PLACE NEPTUNE BEACH FL 32266	106 HALL PLACE NEPTUNE BEACH FL 32266

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: **04/20/1993**
3a. Date of Last Report: **05/01/1994**

2. Principal Place of Business	2a. Mailing Address
21 2806 1st Street S	26 2806 1st Street S
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: Jacksonville Beach FL	28 City & State: Jacksonville Beach FL
24 Zip: 32250 25 Country: USA	29 Zip: 32250 30 Country: USA

4. FEI Number: **59-3185716** ☐ 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
WEST, CHRISTOPHER D 106 HALL PLACE NEPTUNE BEACH FL 32266	81 Name: same 82 Street Address (P.O. Box Number is Not Acceptable): 2806 1st 83 84 City: Jacksonville Beach FL 85 Zip Code: 32250

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: Christopher D. West Director DATE: 5.1.95
Signature, fixed or printed name of registered agent and title if agent is a corporation (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	11 TITLE	same	☑ Change ☐ Addition
NAME	WEST, CHRISTOPHER D	12 NAME	same	
STREET ADDRESS	106 HALL PLACE	13 STREET ADDRESS	2806 1st Street S	
CITY-ST-ZIP	NEPTUNE BEACH FL 32266	14 CITY-ST-ZIP	Jacksonville Beach FL 32250	
TITLE	D	21 TITLE	same	☑ Change ☐ Addition
NAME	KENT, PAUL R	22 NAME	same	
STREET ADDRESS	9513 BUSINESS CTR. DR., SUITE B	23 STREET ADDRESS	1061 Civic Center Drive	
CITY-ST-ZIP	RANCHO CUCAMONGA CA 91729	24 CITY-ST-ZIP	Rancho Cucamonga CA 91729	
TITLE	D	31 TITLE	same	☑ Change ☐ Addition
NAME	KENT, WILLIAM D	32 NAME	same	
STREET ADDRESS	9513 BUSINESS CTR. DR., SUITE B	33 STREET ADDRESS	1061 Civic Center Drive	
CITY-ST-ZIP	RANCHO CUCAMONGA CA 91729	34 CITY-ST-ZIP	Rancho Cucamonga CA 91729	
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY-ST-ZIP		44 CITY-ST-ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

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)(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 added on an attachment with an address.

SIGNATURE: Christopher D. West Director 5.1.95 (904) 249-9923
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

000090 CP