

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P93000039666 (1)
1. Corporation Name

VALIDATA, INC.

Principal Place of Business

1610 BECK AVE.
PANAMA CITY FL 32405

Mailing Address

1610 BECK AVE.
PANAMA CITY FL 32405



2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt #, etc.

26 Suite, Apt #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

9. Name and Address of Current Registered Agent

KOLK, JACALYN N
1610 BECK AVE.
PANAMA CITY FL 32405

3. Date Incorporated or Qualified

05/25/1993

3a. Date of Last Report

05/01/1995

4. FEI Number

59-3180237

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 ☒

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 resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D NICHOLS, VERNA L
4 BELLEVUE BLVD., #107
BELLEAIR FL 34616

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D KOLK, JACALYN N
1610 BECK AVE.
PANAMA CITY FL 32405

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D EDWARDS, MARGARET N
6300 WALEBRIDGE LANE
AUSTIN TX 78739

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D WESTBROOK, LAUREL N
RT 6 BOX 8502-2
CRAWFORDVILLE FL

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

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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

800001895838

-07/17/96--01011--023

***225.00

7-16-96

CR2E034 (3/96)

SIGNATURE:

Jacalyn N Kolk
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/6/96

904-785-0533