

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 MAY -1 PM 3:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000059554 (4)

1. Corporation Name

ADMINISTRATIVE ARTS, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business

1110 HUNTER AVE.
ORLANDO FL 32804

Mailing Address

1110 HUNTER AVE.
ORLANDO FL 32804

3. Date Incorporated or Qualified
08/25/1993

3a. Date of Last Report
04/29/1994

4. FEI Number
59-3198013

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. 190.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21 **3107 Ardsley Dr.**

2a. Mailing Address

26 **P.O. Box 547935**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 **Orlando, FL**

City & State

28 **Orlando, FL**

Zip

24 **32804**

Country

25 **US**

Zip

29 **32854-7935**

Country

30 **US**

9. Name and Address of Current Registered Agent

**LUSSIER, JAMES R
225 E. ROBINSON ST.
SUITE 600
ORLANDO FL 32801**

10. Name and Address of New Registered Agent

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

B3

B4 City

FL

B5 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 of Agent or person authorized to execute appointment required after 5/1/94)

(Signature of Agent or person authorized after 5/1/94)

(Date)

12. OFFICERS AND DIRECTORS

12.1 TITLE

NAME
STREET ADDRESS
CITY, ST, ZIP
**HARRIS, BRENDA B
1110 HUNTER AVE.
ORLANDO FL 32804**

12.2 TITLE

NAME
STREET ADDRESS
CITY, ST, ZIP

12.3 TITLE

NAME
STREET ADDRESS
CITY, ST, ZIP

12.4 TITLE

NAME
STREET ADDRESS
CITY, ST, ZIP

12.5 TITLE

NAME
STREET ADDRESS
CITY, ST, ZIP

12.6 TITLE

NAME
STREET ADDRESS
CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE

NAME
STREET ADDRESS
CITY, ST, ZIP
**3107 Ardsley Dr.
Orlando, FL. 32804**

13.2 TITLE

13.3 TITLE

13.4 TITLE

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13.25 TITLE

14. I do hereby certify that the information supplied with this filing voluntarily furnished and I do not qualify for the exemption stated in Section 190.032(1)(b), Florida Statutes. I further certify that the information included on this annual report or biennial 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 liquidator thereof and that my signature would be required to make this report as required by Chapter 1437, Florida Statutes, and that my name appears in Block 12 or Block 13 of this form. I or others attached with an address.

SIGNATURE:

Sandra S. Harris (BRENDA B. HARRIS)

4/10/95 (407) 849-9744

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR