

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 AM 6:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000074897 (8)

1. Corporation Name

CONSULTING SERVICE & INFORMATION, INC.

Principal Place of Business

Mailing Address

2482 SCARLET OAK CT.
SARASOTA FL 34232

2482 SCARLET OAK CT.
SARASOTA FL 34232

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

10/25/1993

3a. Date of Last Report

05/01/1994

4. FEI Number

65-0442429

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

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

* FARRELL, LAURA
2482 SCARLET OAK CT.
SARASOTA FL 34232

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 separation required when reappointing)

DATE

12.

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

PD

NAME

FARRELL, LAURA

STREET ADDRESS

2482 SCARLET OAK CT.

CITY- ST- ZIP

SARASOTA FL 34232

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY- ST- ZIP

Change Addition
000001471900
-05/02/95--01156--010
****200.00 ****200.00

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY- ST- ZIP

Change Addition
FARRELL II, Daniel J.
2482 SCARLET OAK CT.
SARASOTA, FL. 34232

31. TITLE

32. NAME

33. STREET ADDRESS

34. CITY- ST- ZIP

Change Addition

41. TITLE

42. NAME

43. STREET ADDRESS

44. CITY- ST- ZIP

Change Addition

51. TITLE

52. NAME

53. STREET ADDRESS

54. CITY- ST- ZIP

Change Addition

61. TITLE

62. NAME

63. STREET ADDRESS

64. CITY- ST- ZIP

Change Addition

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 110.07(2)(b), 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:

Handwritten Signature
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-19-95

(813) 579-3088