

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

PROFIT CORPORATION  
ANNUAL REPORT  
**1996**



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

**DOCUMENT # P94000000406**

1. Corporation Name

**DG Training Systems, Inc.**

Principal Place of Business

Mailing Address

**1625 West Garden St.  
Pensacola, FL 32501**

**1625 West Garden St.  
Pensacola, FL 32501**

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

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25

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30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

3a. Date of Last Report

**December 23, 93**

**May 1995**

4. FEI Number

**59-3219494**

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

**Janice R. Trowbridge  
1625 West Garden St.  
Pensacola, FL 32501**

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 607.0602 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 607.0605, Florida Statutes.

SIGNATURE **Janice R. Trowbridge, President**

**05/20/96**

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	President	<input type="checkbox"/> DELETE
NAME	Janice R. Trowbridge	
STREET ADDRESS	2314 Libra Ln., Pensacola, FL	
CITY - ST - ZIP	32534	
TITLE	Secretary/Treasurer	<input type="checkbox"/> DELETE
NAME	George L. Trowbridge	
STREET ADDRESS	2314 Libra Ln., Pensacola, FL	
CITY - ST - ZIP	32534	
TITLE		<input type="checkbox"/> DELETE
NAME		
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1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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61. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62. NAME	
63. STREET ADDRESS	
64. CITY - ST - ZIP	

**100001866581**  
**-06/19/96--01031--051**  
**\*\*\*225.00**

*George L. Trowbridge*

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)(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, changed, when an attachment with an address

SIGNATURE: **George L. Trowbridge**

**05/20/96**

**(904) 438-1011**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)