

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

**APPROVED
AND
FILED**

**CORPORATION
ANNUAL REPORT
1995**



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

95 MAY -1 AM 9: 29

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # P94000003355 (2)

1. Corporation Name

~~CUSTOM ACADEMIC MATERIALS & SUPPLEMENTS, INC.~~
SHARP COPIES & PRINT, INC.

**300001484603
-05/11/95--01092--017
***200.00 ***200.00**

Principal Place of Business

**3042 MARTIN STREET
ORLANDO FL 32806**

Mailing Address

**3042 MARTIN STREET
ORLANDO FL 32806**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **12/31/1993** 3a. Date of Last Report **05/01/1994**

4. FEI Number **59-3225262** 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 (1)(2), Florida Statutes. ☐ Yes ☒ No

2. Principal Place of Business
21. **13140 COLLEGGATE WAY, SUITE 110
ORLANDO, FL 32817-2157**
Suite, Apt. #, etc.

2a. Mailing Address
26. **13140 COLLEGGATE WAY, SUITE 110
ORLANDO, FL 32817-2157**
Suite, Apt. #, etc.

22. **SUITE 110**
City & State

27. **SUITE 110**
City & State

23. **ORLANDO FL**

28. **ORLANDO, FL**

24. **32817-2157** 25. **FLORIDA**

29. **32817-2157** 30. **FLORIDA**

9. Name and Address of Current Registered Agent

**SHARP, THOMAS H III
3042 MARTIN STREET
ORLANDO FL 32806**

10. Name and Address of New Registered Agent

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
2491 ECON CIRCLE # 210
83.
84. City **ORLANDO** FL 85. Zip Code **32817-2655**

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 *Thomas H. Sharp III*

4/28/95

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	D
2. NAME	SHARP, THOMAS H III
3. STREET ADDRESS	3042 MARTIN ST.
4. CITY, ST, ZIP	ORLANDO FL 32806
5. TITLE	
6. NAME	
7. STREET ADDRESS	
8. CITY, ST, ZIP	
9. TITLE	
10. NAME	
11. STREET ADDRESS	
12. CITY, ST, ZIP	
13. TITLE	
14. NAME	
15. STREET ADDRESS	
16. CITY, ST, ZIP	
17. TITLE	
18. NAME	
19. STREET ADDRESS	
20. CITY, ST, ZIP	

1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	2491 ECON CIRCLE # 210
4. CITY, ST, ZIP	ORLANDO, FL 32817-2655
5. TITLE	☐ Change ☐ Addition
6. NAME	
7. STREET ADDRESS	
8. CITY, ST, ZIP	
9. TITLE	☐ Change ☐ Addition
10. NAME	
11. STREET ADDRESS	
12. CITY, ST, ZIP	
13. TITLE	☐ Change ☐ Addition
14. NAME	
15. STREET ADDRESS	
16. CITY, ST, ZIP	
17. TITLE	☐ Change ☐ Addition
18. NAME	
19. STREET ADDRESS	
20. CITY, ST, ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and true and equally for the exemptions stated in Sections 135.07(1) and 135.07(2), Florida Statutes, that the information is not required to be filed with the Department of State and that the undersigned shall have the same legal effect and no other effect. I am an officer or director of the corporation or the receiver or trustee empowered to prepare this report as required by Chapter 407, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or on an attachment with this filing.

SIGNATURE:

Thomas H. Sharp III
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/95

(407) 382-5555