

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra E. Mathiam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000013324 (6)

1. Corporation Name

DIGITAL COMMUNICATIONS CONSULTANTS, INC.



Principal Place of Business

1821 E JEFFERSON ST
ORLANDO FL 32803

Mailing Address

1821 E JEFFERSON ST
ORLANDO FL 32803

2. Principal Place of Business

21 1832 E. Robinson St.

Suite, Apt. #, etc.

22

City & State

23 ORLANDO FL

Zip

24 32803

Country

25 US

2a. Mailing Address

26 1832 E. Robinson St.

Suite, Apt. #, etc.

27

City & State

28 ORLANDO, FL

Zip

29 32803

Country

30 US

3. Date Incorporated or Qualified
02/14/1994

3a. Date of Last Report
04/24/1995

4. FEI Number
59-3229494

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

9. Name and Address of Current Registered Agent

GLASSFORD, BRUCE W
1821 E JEFFERSON ST
ORLANDO FL 32803

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 607.0507 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 AND TYPED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE AND TYPED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

12.

OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

D

GLASSFORD, BRUCE W
1821 E JEFFERSON ST
ORLANDO FL 32803

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

☐ DELETE

TITLE

NAME

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☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

☐ DELETE

SIGNATURE

SIGNATURE AND TYPED NAME OF SIGNING OFFICER OR DIRECTOR

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY-STATE-ZIP

15 TITLE

16 NAME

17 STREET ADDRESS

18 CITY-STATE-ZIP

19 TITLE

20 NAME

21 STREET ADDRESS

22 CITY-STATE-ZIP

23 TITLE

24 NAME

25 STREET ADDRESS

26 CITY-STATE-ZIP

27 TITLE

28 NAME

29 STREET ADDRESS

30 CITY-STATE-ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ 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 119.02(3)(a) Florida Statutes. I further certify that the information included on this annual report or supplementary 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 this corporation or its registered or business agent and I have filed this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 of this report as an officer or director.

4-4-96

(4107) 894-1839

CR2E034 (12/95)