FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 12 PM 11:26

DOCUMENT # **P94000014615 (6)**

1. Corporation Name
RESOURCE MANAGEMENT TECHNOLOGIES, INC.

Principal Place of Business	Mailing Address
1170 JASPER STREET LARGO FL 34640	1170 JASPER STREET LARGO FL 34640

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 02/23/1994
3a. Date of Last Report:

2. Principal Place of Business — 21:
Suite, Apt. #, etc. — 22:
City & State — 23:
Zip — 24: Country — 25:

2a. Mailing Address — 26:
Suite, Apt. #, etc. — 27:
City & State — 28:
Zip — 29: Country — 30:

4. FEI Number: 59-322-1210 ☐ 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

HENDRICKSON, GARY A
1170 JASPER ST.
LARGO FL 34640

10. Name and Address of New Registered Agent

61 Name
62 Street Address (P.O. Box Number is Not Acceptable)
63
64 City: FL — 65 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	11 TITLE	PRESIDENT	☒ Change ☐ Addition
NAME	GLASER, WILLIAM P	12 NAME	GLASER, WAYNE P.	
STREET ADDRESS	14023 JOEL COURT	13 STREET ADDRESS	1170 JASPER ST.	
CITY ST ZIP	LARGO FL 34644	14 CITY ST ZIP	LARGO, FL 34640	
TITLE	D	21 TITLE	VICE PRESIDENT SALES	☒ Change ☐ Addition
NAME	DODGE, JAY P	22 NAME	DODGE, JAY P.	
STREET ADDRESS	3315 HAVILAND CT.	23 STREET ADDRESS	1170 JASPER ST.	
CITY ST ZIP	PALM HARBOR FL 34684	24 CITY ST ZIP	LARGO, FL 34640	
TITLE	D	31 TITLE	VICE PRESIDENT & C.F.O.	☒ Change ☐ Addition
NAME	HENDRICKSON, GARY A	32 NAME	HENDRICKSON, GARY A.	
STREET ADDRESS	1109 ROSERY RD. NE	33 STREET ADDRESS	1170 JASPER ST.	
CITY ST ZIP	LARGO FL 34640	34 CITY ST ZIP	LARGO, FL 34640	
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY ST ZIP		44 CITY ST ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY ST ZIP		54 CITY ST ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY ST ZIP		64 CITY ST ZIP		

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)(i), 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: Gary A. Hendrickson TREASURER GARY A. HENDRICKSON 4-7-96 (813) 588-0755
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0381140 CP