

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

FILED

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE **95 MAY -1 AM 5:25**

Barbara B. Whitman
Secretary of State

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # P94000014894 (7)

SUPPORT SERVICES GROUP, INC.

Principal Place of Business
**1807 PINAR COURT
ST. CLOUD FL 34769**

Mailing Address
**1807 PINAR COURT
ST. CLOUD FL 34769**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 02/24/1994	3a. Date of Last Report
4. FEI Number 59-3221461	☐ 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 FS 199.032, Florida Statutes. ☒ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21. State Apt. # etc.	26. State Apt. # etc.
22. City & State	27. City & State
23. ZIP	28. ZIP
24. Country	29. Country
25. Country	30. Country

8. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
PERSYNS, BRADLEY 1807 PINAR COURT ST. CLOUD FL 34769	81. Name
	82. Street Address (P.O. Box Numbers Not Acceptable)
	83. City
	84. State 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 obligation of Section 607.0602, Florida Statutes.

SIGNATURE _____ **By _____, Registered Agent, or authorized officer**

12. OFFICERS AND DIRECTORS	13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS
1. NAME D PERSYNS, BRADLEY 1807 PINAR COURT ST. CLOUD FL 34769	☐ Change ☐ Addition
2. NAME D PERSYNS, ERIC 1807 PINAR COURT ST. CLOUD FL 34769	☐ Change ☐ Addition
3. NAME	☐ Change ☐ Addition
4. NAME	☐ Change ☐ Addition
5. NAME	☐ Change ☐ Addition
6. NAME	☐ Change ☐ Addition
7. NAME	☐ Change ☐ Addition
8. NAME	☐ Change ☐ Addition
9. NAME	☐ Change ☐ Addition
10. NAME	☐ Change ☐ Addition
11. NAME	☐ Change ☐ Addition
12. NAME	☐ Change ☐ Addition
13. NAME	☐ Change ☐ Addition
14. NAME	☐ Change ☐ Addition
15. NAME	☐ Change ☐ Addition
16. NAME	☐ Change ☐ Addition
17. NAME	☐ Change ☐ Addition
18. NAME	☐ Change ☐ Addition
19. NAME	☐ Change ☐ Addition
20. NAME	☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.032(5)(b), Florida Statutes. Further, I certify that the information included on this 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 a resident or officer of the corporation or the record or trustee empowered to execute this report as required by Chapter 199, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or both, in that block with an address.

SIGNATURE: *Bradley J. Persyns* BRADLEY J. PERSYNS 4-8-95 407-951-5600