

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000020225 (6)

1. Corporation Name

TECHNICAL DESIGN SOLUTIONS, INC.



Principal Place of Business

2855 KIRBY AVE., N.E.
SUITE 4
PALM BAY FL 32905
US

Mailing Address

2855 KIRBY AVE., N.E.
SUITE 4
PALM BAY FL 32905
US

3. Date Incorporated or Qualified
03/10/1994

3a. Date of Last Report
04/25/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number
59-3230546

Applied For
Not Applicable

22

27

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

23

28

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

24

29

30

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FERENCE, JEFFREY W
478-1 CLUB TRAIL
MELBOURNE FL 32901

81 Name

FERENCE, JEFFREY W.

82 Street Address (P.O. Box Number is Not Acceptable)

2120 Valley Rd

83

84 City

Malabar

FL

85 Zip Code

32950

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

Signature typed or printed name of registered agent (see the Filer's Manual)

(NOTE: Profit and Apportionment signatures required when filing 1041)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME FERENCE, JEFFREY W
STREET ADDRESS 478-1 CLUB TRAIL
CITY-ST-ZIP MELBOURNE FL 32901

TITLE D ☐ DELETE

NAME DAVID, JOHN
STREET ADDRESS 864 DAMASK STREET
CITY-ST-ZIP PALM BAY FL 32905

TITLE D ☐ DELETE

NAME MILLER, THOMAS I
STREET ADDRESS 3301 MEADOW RIDGE DR
CITY-ST-ZIP MELBOURNE FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D ☒ Change ☐ Addition

1.2 NAME Ference, Jeffrey W.
1.3 STREET ADDRESS 2120 Valley Rd.
1.4 CITY-ST-ZIP Malabar, FL 32950

2.1 TITLE D ☒ Change ☐ Addition

2.2 NAME David, John
2.3 STREET ADDRESS 2100 Valley Rd.
2.4 CITY-ST-ZIP Malabar, FL 32950

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 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)(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 if changed, or on an attachment with an address.

SIGNATURE: Thomas I. Miller, JD *Thomas I. Miller* 5/20/96 4077277879
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)