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CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 27 AM 7:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000022891 (3)

1. Corporation Name

DANKA HOLDING COMPANY

Principal Place of Business

11201 DANKA CIR N
ST PETERSBURG FL 33716

Mailing Address

11201 DANKA CIR N
ST PETERSBURG FL 33716

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 3a. Date of Last Report

03/24/1994

4. FEI Number

59-3231902

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

6. Does corporation have liability for intangible tax under S 199.032
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21

26

State Apt # etc

State Apt # etc

22 CORP. TAX

27 CORP. TAX

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION FL 33324

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 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office and 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 of Registered Agent (if registered agent is not the corporation)

Signature of Registered Agent (if not the corporation)

Date

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12a	12b
NAME	D DOYLE, DANIEL M
STREET ADDRESS	11201 DANKA CIR N
CITY, ST, ZIP	ST PETERSBURG FL 33716
NAME	D SNELL, DAVID C
STREET ADDRESS	11201 DANKA CIR N
CITY, ST, ZIP	ST PETERSBURG FL 33716
NAME	D FREEMAN, WILLIAM T
STREET ADDRESS	11201 DANKA CIR N
CITY, ST, ZIP	ST PETERSBURG FL 33716
NAME	D TAYLOR, DEBRA A
STREET ADDRESS	11201 DANKA CIR N
CITY, ST, ZIP	ST PETERSBURG FL 33716
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13a	13b	13c
13a1 NAME	PRESIDENT / DIRECTOR	☒ Change ☐ Addition
13a2 NAME		
13a3 STREET ADDRESS		
13a4 CITY, ST, ZIP		
13b1 NAME	VICE PRESIDENT / DIRECTOR	☒ Change ☐ Addition
13b2 NAME		
13b3 STREET ADDRESS		
13b4 CITY, ST, ZIP		
13c1 NAME	TREASURER / DIRECTOR	☒ Change ☐ Addition
13c2 NAME		
13c3 STREET ADDRESS		
13c4 CITY, ST, ZIP		
13d1 NAME	SECRETARY / DIRECTOR	☒ Change ☐ Addition
13d2 NAME		
13d3 STREET ADDRESS		
13d4 CITY, ST, ZIP		
13e1 NAME		☐ Change ☐ Addition
13e2 NAME		
13e3 STREET ADDRESS		
13e4 CITY, ST, ZIP		
13f1 NAME		☐ Change ☐ Addition
13f2 NAME		
13f3 STREET ADDRESS		
13f4 CITY, ST, ZIP		

14. I hereby certify that the information supplied with this filing is voluntarily furnished and there is no liability for the corporation stated in S 199.021, 199.032, Florida Statutes. Further, I certify that the information included 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. I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 202, Florida Statutes, and that my name appears on Block 12 or Block 13 of this report or on an attachment with an address.

SIGNATURE:

Scott Repinski

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

R. SCOTT REPINSKI
TAX DIRECTOR

(813) 576-6003