

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 90962 033 ***150.00

DOCUMENT # P94000023853

1. Entity Name
DANKA MANAGEMENT COMPANY, INC.



Principal Place of Business
**11201 DANKA CIRCLE NORTH
CORP. TAX
ST. PETERSBURG FL 33716
US**

Mailing Address
**11201 DANKA CIRCLE NORTH
CORP. TAX
ST. PETERSBURG FL 33716
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3231899**

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State**

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

10. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	LOWREY, P LANG III	
STREET ADDRESS	11201 DANKA CIRCLE N	
CITY-ST-ZIP	ST. PETERSBURG FL 33716	
TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	MERRIMAN, BRIAN L	
STREET ADDRESS	11201 DANKA CIRCLE N	
CITY-ST-ZIP	ST. PETERSBURG FL 33716	
TITLE	V	<input type="checkbox"/> Delete
NAME	MAVIS, TODD L	
STREET ADDRESS	11201 DANKA CIRCLE N	
CITY-ST-ZIP	ST. PETERSBURG FL 33716	
TITLE	VD	<input type="checkbox"/> Delete
NAME	WOLFINGER, F. MARK	
STREET ADDRESS	11201 DANKA CIRCLE N	
CITY-ST-ZIP	ST. PETERSBURG FL 33716	
TITLE	VSD	<input type="checkbox"/> Delete
NAME	NELSEN, KEITH J	
STREET ADDRESS	11201 DANKA CIRCLE NO	
CITY-ST-ZIP	ST PETERSBURG FL 33716	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	DAVIS, RICARDO A	
STREET ADDRESS	11201 DANKA CIRCLE N	
CITY-ST-ZIP	ST PETERSBURG FL 33716	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	FD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Laurens F. Schaefer, Jr.	
STREET ADDRESS	11201 Danka Circle N.	
CITY-ST-ZIP	St. Petersburg, FL 33716	
TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Thomas J. Anderlik	
STREET ADDRESS	11201 Danka Circle N.	
CITY-ST-ZIP	St. Petersburg, FL 33716	
TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Anthony DeLuca	
STREET ADDRESS	11201 Danka Circle N.	
CITY-ST-ZIP	St. Petersburg, FL 33716	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Jeff T. Wood* **REQUIRED** *3/24/03 (727) 578-6727*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)