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May 09 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P94000024876 (2)

1. Corporation Name  
OUTSOURCE DATA, INC.



Principal Place of Business  
2600 S.E. 40TH ST.  
OCALA FL 34480

Mailing Address  
2600 S.E. 40TH ST.  
OCALA FL 34480-5789

3. Date Incorporated or Qualified  
03/31/1994

3a. Date of Last Report  
06/12/1996

2. Principal Place of Business

2a. Mailing Address

4. FEI Number  
59-3236581

Applied For  
Not Applicable

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

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

22 City & State

27 City & State

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

23 Zip

Country

28 Zip

Country

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

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LOCKWOOD, BRIAN R PA  
4046 NEWBERRY RD  
GAINESVILLE FL 32607

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 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 and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PT ☐ DELETE

NAME WEIGLE, SUSAN M  
STREET ADDRESS 2600 SE 40TH ST  
CITY-ST-ZIP Ocala FL 34480

1.1 TITLE ☐ Change ☐ Addition

TITLE VPS ☐ DELETE

NAME HEALY, DONNA M  
STREET ADDRESS 3315 SE 25TH AVE  
CITY-ST-ZIP Ocala FL

2.1 TITLE ☐ Change ☐ Addition

TITLE D ☐ DELETE

NAME LOCKWOOD, BRIAN R PA  
STREET ADDRESS 4046 NEWBERRY ROAD  
CITY-ST-ZIP GAINESVILLE FL 32607

3.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.2 TITLE ☐ Change ☐ Addition

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/22/97 352-622-5992  
Date Daytime Phone #

CR2E034 (9/96)