

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

PROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Murdison

Secretary of State

DEPARTMENT OF CORPORATIONS

1996 3-2096

B-2510

C

DOCUMENT # P94000024879 (6)

1. Corporation Name

MORGAN & DUDLEY CONSULTING, INC.

Principal Place of Business

530 LAKE AVE.
ORLANDO FL 32801

Mailing Address

530 LAKE AVE.
ORLANDO FL 32801



2. Principal Place of Business

21 State Apt. #, etc.
22 City & State
23 Zip
24 Country

2a. Mailing Address

26 State Apt. #, etc.
27 City & State
28 Zip
29 Country

9. Name and Address of Current Registered Agent

HARVEY, ROSEMARY D.
530 LAKE AVENUE
ORLANDO FL 32801

3. Date Incorporated or Qualified

03/31/1994

3a. Date of Last Report

04/11/1995

4. FLE Number

59-3233383

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 s. 199.032,
Florida Statutes.

☐ Yes ☐ No

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 607.1502, 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 of person making this change in the corporation

Signature of Registered Agent

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
	DPST HARVEY, ROSEMARY	530 LAKE AVE.	ORLANDO FL 32801

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	2. NAME	3. STREET ADDRESS	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 X

Rosemary Harvey
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/14/96

407-425-4742

CR2E034 (12/95)