FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP





FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS **FILED**

Apr 29 1998 8:00am

Secretary of State

Change

Addition

DOCUMENT # P94000025316 (8)

ECDD ADDDAIGHT AGENCY INC

FORD	AFFINIOAL AGENCY, INC	<i>,</i> ,				
Principal Place of Business Mailing Address					L CONTINUES AND TOTAL DIRECT MARKET MARKET DAY	18 (1891 BINSE INSI 11815 BIN 1891
8684 RENOVA COURT ORLANDO FL 32825		8684 RENOVA COURT ORLANDO FL 32825		: DO NOT WRITE IN TH	HIS SPACE	
					3. Date Incorporated or Qualified	
					04/01/1994	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For	
21 Culta Ant # Ota		26			59-3234237	Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	е	City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	<u>├</u>		Country	,	8. This corporation owes or has paid the	
24	25 29 30		30	Personal Property Tax due June 30. Yes No		
g. Name and Address of Current Registered Agent				N	10. Name and Address of New Register	ed Agent
	ORD, WILLIAM M		81	Name		
8684 RENOVA COURT			82	Street Add	ress (P.O. Box Number is Not Acceptable)	
ORLANDO FL 32825			83			
			84	City		85 Zip Code
11, Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Stat	tutes, the above	named corp	poration submits this statement for the purpos	e of changing its registered
agent. I a	m familiar with fild accept the oblig	gations of Section 607.05 05 ,	s aumorized by Florida Statute:	r ine corpora 3.	tion's board of directors. I hereby accept the	appointment as registered
SIGNATURE	William M.	FM WILLIA	m M.	Fores	0 4-21-98	
12.	Signature typed or printed name of registered at	pent and title if applicable (N ND DIRECTORS		nt signature requi	ired when reinstating) DAT	E
TITLE	DPVS OF TOURS AF	DELETE	13. 1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS	Change Addition
NAME	FORD, WILLIAM M		1.2 NAME			C cominge C vanitari
STREET ADDRESS	8684 RENOVA COURT		1.3 STREET ADDRESS			
CITY-ST-ZIP	ODI ANDO EL DOGGE		1.4 CITY-S			
TITLE			2.1 TOLE	, en		Change Addition
NAME	PARK IANGELANA		2.2 NAME			
STREET ADDRESS			2.3 STREET	2.3 STREEI ADDRESS		
CITY-ST-ZIP			2. 4 CITY - 9	i I - ZiP		
TITLE	DELETE 3.1 TI		3.1 TITLE		.11	Change Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET	ADDRESS		
CITY-ST-ZIP		·	3.4. CITY - S	T-ZIP		
TITLE	☐ DELETE 4.1 TI		4.1 TITLE			☐ Change ☐ Addition
NAME			4.2 NAME			
STREET ADDRESS	•		4.3 STREET			
CITY-ST-ZIP		T bearer	4.4 CITY-S	r- ZIP	***************************************	
TITLE		DELETE	5.1 TITLE			☐ Change ☐ Addition
NAME OTDEET ADDOSES			5.2 NAME			
STREET ADDRESS			5.3 STREET			
CITY-ST-ZIP			5.4 CHY- S	- 7IP		

14. 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 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 trusted 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 any address.

5.4 CITY - ST - ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

DELETE