FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED
95 MAY -1 AM 10:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # [redacted] P94000046433

1. Corporation Name
THE SOFTWARE ZONE

Principal Place of Business / Mailing Address
4970 STACK BLVD SUITE B2
MELBOURNE FL 32901

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 6/14/94	3a. Date of Last Report: 6/14/94

2. Principal Place of Business	2a. Mailing Address
21 4970 STACK BLVD	26 4970 STACK BLVD
Suite / Apt. #, etc.	Suite / Apt. #, etc.
22 B2	27 B2
City & State	City & State
23 MELBOURNE FL	28 MELBOURNE FL
Zip / Country	Zip / Country
24 32901 / 25 BREVARD	29 32901 / 30 BREVARD

4. FEI Number: 59-3251746 ☐ 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

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
CURTIS L. CHURCH JR. 305 CINNAMON LAKE CIRCLE MELBOURNE FL 32901	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 (If changing Registered Agent, Registered Agent must sign) (NEW Registered Agent's signature required when applicable) DATE

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE / NAME / STREET ADDRESS / CITY ST ZIP: [illegible]	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY ST ZIP ☐ Change ☐ Addition
TITLE: PRESIDENT NAME: CURTIS L. CHURCH JR. STREET ADDRESS: 305 CINNAMON LAKE CIRCLE CITY ST ZIP: MELBOURNE FL 32901	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY ST ZIP ☐ Change ☐ Addition 4000001477384 -05/08/95--01010--007 ****200.00 ****200.00
TITLE: VICE PRESIDENT NAME: JOHN T. FERONTI STREET ADDRESS: 3460 PAN PALM BLVD CITY ST ZIP: MELBOURNE FL 32901	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY ST ZIP ☐ Change ☐ Addition
TITLE: VICE PRES/TREAS NAME: DAVID W. CHURCH STREET ADDRESS: 245 CINNAMON LAKE CIRCLE CITY ST ZIP: MELBOURNE FL 32901	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY ST ZIP ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY ST ZIP ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY ST ZIP ☐ Change ☐ Addition 87511

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)(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 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: JOHN FERONTI [signature] 4/27/95 (Date) 407 726 5977 (Daytime Phone #)
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR