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 MAR 30 AM 6:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000058017 (2)**

1. Corporation Name
ADVANTAGE SALES & MARKETING, INC.

300001448503
-04/06/95--01002--015
****208.75 ****208.75

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
1125 U.S. 98 SOUTH, SUITE 200 LAKELAND FL 33801	1125 U.S. 98 SOUTH, SUITE 200 LAKELAND FL 33801

3. Date Incorporated or Qualified: 08/08/1994
3a. Date of Last Report:

2. Principal Place of Business	2a. Mailing Address
21 1301 NE 14TH STREET	26 1301 NE 14TH STREET
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 OCALA, FLORIDA	City & State 28 OCALA, FLORIDA
Zip 24 34470 Country 25 USA	Zip 29 34470 Country 30 USA

4. FEI Number: 59-3257504 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired 2 ☒ **$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

MILBRATH, L. MICHAEL
1301 N.E. 14TH STREET
OCALA FL 34470

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 607.1508, 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	11 TITLE	PD ☒ Change ☐ Addition
NAME	LEE, CLIFFORD G JR.	12 NAME	HAROLD F. HAASER
STREET ADDRESS	1125 U.S. 98 SOUTH, SUITE 200	13 STREET ADDRESS	1301 NE 14TH STREET
CITY-ST-ZIP	LAKELAND FL 33801	14 CITY-ST-ZIP	OCALA, FLORIDA 34470
TITLE	SD	21 TITLE	☒ Change ☐ Addition
NAME	WRIGHT, RANDY	22 NAME	
STREET ADDRESS	1125 U.S. 98 SOUTH, SUITE 200	23 STREET ADDRESS	DELETE
CITY ST ZIP	LAKELAND FL 33801	24 CITY ST ZIP	
TITLE	TD	31 TITLE	☒ Change ☐ Addition
NAME	ST. JOHN, JOSEPH	32 NAME	
STREET ADDRESS	1125 U.S. 98 SOUTH, SUITE 200	33 STREET ADDRESS	DELETE
CITY ST ZIP	LAKELAND FL 33801	34 CITY-ST-ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	TLS, 3/30/95
CITY ST ZIP		44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 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)(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: Harold F. Haaser MARCH 20, 1995 (813) 686-1400
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

HAROLD F. HAASER

0446002 FP