

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

FILED
Apr 03 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P94000061522 (6)

1. Corporation Name
P.R.I.S.M. PARTNERS, INC.



Principal Place of Business 3712 HOWELL BRANCH ROAD WINTER PARK FL 32792	Mailing Address 3712 HOWELL BRANCH ROAD WINTER PARK FL 32792-1740
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2. Principal Place of Business 21 3712 Howell Branch Rd Suite, Apt. #, etc. 22 City & State 23 Winter Park FL 24 Zip 32792 Country Seminole	2a. Mailing Address 25 3712 Howell Branch Rd Suite, Apt. #, etc. 27 City & State 28 Winter Park FL 29 Zip 32792 Country Seminole	3. Date Incorporated or Qualified 08/15/1994 3a. Date of Last Report 04/30/1996 4. FEI Number 59-3263431 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
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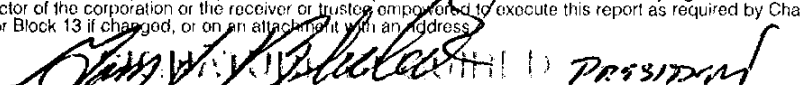
9. Name and Address of Current Registered Agent BLALOCK, GARY 12424 RESEARCH PARKWAY SUITE 200 ORLANDO FL 32826	10. Name and Address of New Registered Agent 81 Name GARY F. Blalock 82 Street Address (P.O. Box Number is Not Acceptable) 3712 Howell Branch Rd 83 Winter 84 City Winter Park FL 85 Zip Code 32792
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	D
NAME	BLALOCK, GARY	1.2 NAME	Blalock, Gary
STREET ADDRESS	12424 RESEARCH PARKWAY, SUITE 260	1.3 STREET ADDRESS	3712 Howell Branch Rd
CITY-ST-ZIP	ORLANDO FL 32826	1.4 CITY-ST-ZIP	Winter Park FL 32792
TITLE	D	2.1 TITLE	D
NAME	HOUCK, DORIS	2.2 NAME	Houck, Doris
STREET ADDRESS	12424 RESEARCH PARKWAY, SUITE 260	2.3 STREET ADDRESS	3712 Howell Branch Rd
CITY-ST-ZIP	ORLANDO FL 32826	2.4 CITY-ST-ZIP	Winter Park FL 32792
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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 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:  PRESIDENT 3/28/97 (407) 677-3300

CR2E034 (9/96)