

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

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
 Bruce S. McArthur
 Secretary of State
 DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 APR 28 AM 10:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 09/19/1994	3a. Date of Last Report
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4. FBI Number	59-3268187	Applied For
		Not Applicable

5. Certificate of Status Desired	☐	\$8.75 Additional Fee Required
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6. Election Campaign Financing Trust Fund Contribution	☐	\$5.00 May Be Added to Fees
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8. The corporation has liability for intangible tax under S. 199.042, Florida Statutes. ☒ Yes ☐ No

2. Principal Place of Business		2a. Mailing Address	
21		26	
State, Apt. # etc.		State, Apt. # etc.	
22		27	
City & State		City & State	
23		28	
Zip	Country	Zip	Country
24	25	29	30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KATZ, HARRY JR.
337 E. FORSYTH STREET
JACKSONVILLE FL 32202

01	Name	
02	Street Address (P.O. Box Number is Not Acceptable)	
03		
04	City	FL
		05 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1504, 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 _____

Figure 1. Schematic representation of the experimental design.

As 2011 approaches, Apple is pushing its iPad and other products

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[illegible]

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		☐ Change	☒ Addition
1.1 NAME	JAMES D. Griffith JR 1000 Edison AVE JAX, FLA. 32204	☐ Change	☒ Addition
1.2 NAME			
1.3 STREET ADDRESS			
1.4 CITY, ST, ZIP			
2.1 NAME		☐ Change	☐ Addition
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY, ST, ZIP			
3.1 NAME		☐ Change	☐ Addition
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY, ST, ZIP			
4.1 NAME		☐ Change	☐ Addition
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY, ST, ZIP			
5.1 NAME		☐ Change	☐ Addition
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY, ST, ZIP			
6.1 NAME		☐ Change	☐ Addition
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY, ST, ZIP			

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in the law 111-173-000, Florida Statutes. I further certify that the information included 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. I am an officer or director of the Corporation of the Governor or President of the Corporation or any other person responsible for the preparation of the annual report as required by Chapter 602, Florida Statutes, and that my name appears in Block 13 of the form and is an official attachment to this filing.

SIGNATURE:

James D. Triff. Jr.

04-25-95

356-3963