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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

**FILED** 

May 02 1997 8:00am

Secretary of State

DOCUMENT # P94000072614 (8)

DIGIGRAF, INC.

STREET ADDRESS

CITY-ST-ZIP

Principal Place of Business Mailing Address 8904 VAMO ROAD 8904 VAMO ROAD SARASOTA FL 34231 SARASOTA FL 34231-6640 3. Date Incorporated or Qualified 3a. Dale of Last Report 10/04/1994 07/18/1996 2. Principal Place of Business Mailing Address 4. FEI Number Applied For 65-0524438 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zip Country Country Zip This corporation has liability for intangible tax under s. 199.032, 24 Florida Statutes Yes No 29 30 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name HARMON, DAN S 8904 VAMO ROAD 82 Street Address (P.O. Box Number is Not Acceptable) SARASOTA FL 34231 83 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** Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. (96/6)13. DELETE Change Addition 1.1 TITLE TITLE HARMAN, JOHN E NAME 1.2 NAME 8904 VAMO ROAD 1.3 STREET ADDRESS STREET ADDRESS SARASOTA FL 34231 CITY-ST-ZIP 1.4 CI1Y - ST - ZIE Change Addition DELETE 2.1 TITLE TITLE HARMAN, DAN S 2.2 NAMI NAME 8904 VAMO ROAD STREET ADDRESS 2.3 STREET ADDRESS SARASOTA FL 34231 CITY-ST-ZIP 2.4 CITY - \$1 - ZIP DELETE Change Addition TITLE 3.1 UILE HARMAN, MELISSA C 3.2 NAME 8904 VAMO ROAD 3.3 STREET ADDRESS STREET ADDRESS SARASOTA FL 34231 CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4,4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 51 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - 7IP CITY-ST-ZIP Addition DELETE Change 61 TITLE TITLE 6.2 NAME NAME

appears in Block 12 pt Block 13 il changed, or on an attachment with an address Davi Haeman - 4-18-97 941-966-137

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 logal offect as if made under oath; that I am an officer or director of the corporation or the recover or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

6.3 STREET ADDRESS 6.4 CITY - ST - ZIP