

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 APR 20 AM 10:00

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # P94000078937 (7)

1. Corporation Name

REGULATORY SUPPORT SERVICES, INC.

Principal Place of Business

**2325 FARWAY DR. SOUTH
PLANT CITY FL 33567**

Mailing Address

**2325 FARWAY DR. SOUTH
PLANT CITY FL 33567**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

10/24/1994

3a. Date of Last Report

4. FEI Number

59 - 3276851

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**

6. This corporation has liability for intangible tax under S. 198.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21 1701 S. Alexander St

2a. Mailing Address

26 P.O. Box 549

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite 111

27

City & State

City & State

23 Plant City, FL

28 Plant City, FL

Zip

Zip

24 33567

Country

29 33564

Country

30 Hillsborough

9. Name and Address of Current Registered Agent

ALLEN, JOHN N JR.

2325 FARWAY DR. SOUTH — Note Street Misspelled
PLANT CITY FL 33567 Fairway Dr.

81 Name

Same

82 Street Address (P.O. Box Number is Not Acceptable)

2325 Fairway Dr S.

83

84 City

FL

85 Zip Code

10. Name and Address of New Registered Agent

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

JOHN N. ALLEN JR. PRESIDENT

Signature, typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when reappointing)

4/17/95

DATE

12. OFFICERS AND DIRECTORS

TITLE **D**
NAME **ALLEN, JOHN N JR.**
STREET ADDRESS **2325 FARWAY DR. SOUTH** Fairway
CITY - ST - ZIP **PLANT CITY FL 33567**

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

President

☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

2325 Fairway Dr.

1.4 CITY - ST - ZIP

2.1 TITLE

Vice President

☐ Change ☒ Addition

2.2 NAME

Michael C. Cotler

2.3 STREET ADDRESS

3800 Featherwood Tr.

2.4 CITY - ST - ZIP

Lakeland, FL 33813

3.1 TITLE

☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 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 110.07(3)(k), 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 addres.

SIGNATURE:

John N. Allen, Jr.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

John N. Allen, Jr.

4/17/95

DATE

(813) 757-0034

TELEPHONE NUMBER