

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

FILED
Mar 18 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P94000079292 (6)

1. Corporation Name:
MORGAN CONSULTING & SOFTWARE, INC.

Principal Place of Business:
1381 ST. JOSEPH AVENUE EAST
STUART FL 34996

Mailing Address:
1381 ST. JOSEPH AVENUE EAST
STUART FL 34996-4187

2. Principal Place of Business:

21 Suite, Apt. #, etc.

22 City & State:

23 Zip Country

24

2a. Mailing Address:

26 Suite, Apt. #, etc.

27 City & State:

28 Zip Country

29

9. Name and Address of Current Registered Agent

BODEM, LORENE E
815 COLORADO AVE.
SUITE 305
STUART FL 34994

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 607.1505, 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 607.0508, Florida Statutes.

SIGNATURE

(Signature type for print. If name is not known, type "N/A".)

(If "N/A", do not include. See instructions regarding when to use "N/A".)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME MORGAN, PAUL R
STREET ADDRESS 1381 ST JOSEPH AVE EAST
CITY-ST-ZIP STUART FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP ☐ Change ☐ Addition

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP ☐ Change ☐ Addition

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP ☐ Change ☐ Addition

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP ☐ Change ☐ Addition

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP ☐ Change ☐ Addition

61 TITLE

62 NAME

63 STREET ADDRESS

64 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)(d), 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 or empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 or changed, or on an addendum with an address.

SIGNATURE:

3-114-07 (S-1) 297-4187

CP2E034 (9/96)