FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

FILED
May 01 1996 8:00 am
Secretary of State

DOCUMENT # **P95000003350 (2)**

1. Corporation Name

VOLUSIA MARKETING & ASSOCIATES OF ORLANDO, INC.

Principal Place of Business	Mailing Address
313 DIRKSEN DR SUITE D-1 DEBARY FL 32713	313 DIRKSEN DR SUITE D-1 DEBARY FL 32713

2. Principal Place of Business
21 1307 E Normandy Blvd Ste 1
22 Suite, Apt. #, etc.
23 City & State: Deltona, FL
24 Zip: 32725
25 Country: USA

2a. Mailing Address
26 1307 E Normandy Blvd Ste 1
27 Suite, Apt. #, etc.
28 City & State: Deltona, FL
29 Zip: 32725
30 Country: USA

3. Date Incorporated or Qualified: 01/11/1995

3a. Date of Last Report:

4. FEI Number: 59-3287187 ☐ 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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

SMITH, DENISE
8464 PALM PKWY
ORLANDO FL 32836

10. Name and Address of New Registered Agent

81 Name: Tom Lugen
82 Street Address (P.O. Box Number is Not Acceptable): 1307 E. Normandy Blvd, Suite 1
83
84 City: Deltona **FL** 85 Zip Code: 32725

11. Pursuant to the provisions of Sections 607.0505 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: Tom Lugen — 4/30/96
Signature of new registered agent — Date

12. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD SMITH, DENISE 8464 PALM PKWY ORLANDO FL 32836	☒ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD MCNEELY, REBECCA 8464 PALM PKWY ORLANDO FL 32836	☒ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	President Tom Lugen 1307 E Normandy Blvd, Suite 1 Deltona, FL 32725	☒ 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	900001843699 -05/30/96--01008--040 ***200.00	☐ Change ☐ Addition

CR2E034 (12/95)

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 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: TOM LUGEN — 4/30/96 — 407-574-8488
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #