

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000008642 (7)

1. Corporation Name

CHECK SERVICES, INC.



Principal Place of Business

POST OFFICE BOX 1525
ORANGE PARK FL 32067

Mailing Address

POST OFFICE BOX 1525
ORANGE PARK FL 32067

2. Principal Place of Business

21 5175 Blanding Blvd.
Suite Apt. #, etc.

22 City & State

23 Jacksonville, FL

24 32210

25 Duval

2a. Mailing Address

26 5175 Blanding Blvd.
Suite Apt. #, etc.

27 City & State

28 Jacksonville, FL

29 32210

30 Duval

9. Name and Address of Current Registered Agent

SHEFFIELD, J H PA
4209 BAYMEADOWS ROAD STE. 4
JACKSONVILLE FL 32217

3. Date Incorporated or Qualified

01/27/1995

3a. Date of Last Report

4. FBI Number

59-3299475

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

10. Name and Address of New Registered Agent

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 607.0507 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 607.0508, Florida Statutes.

SIGNATURE

Signature of Registered Agent (to be signed by the agent)

Signature of Agent (to be signed by the agent)

DATE

12. OFFICERS AND DIRECTORS

1.1 NAME

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

1.5 TITLE

1.6 NAME

1.7 STREET ADDRESS

1.8 CITY-STATE-ZIP

1.9 TITLE

1.10 NAME

1.11 STREET ADDRESS

1.12 CITY-STATE-ZIP

1.13 TITLE

1.14 NAME

1.15 STREET ADDRESS

1.16 CITY-STATE-ZIP

1.17 TITLE

1.18 NAME

1.19 STREET ADDRESS

1.20 CITY-STATE-ZIP

1.21 TITLE

1.22 NAME

1.23 STREET ADDRESS

1.24 CITY-STATE-ZIP

1.25 TITLE

1.26 NAME

1.27 STREET ADDRESS

1.28 CITY-STATE-ZIP

1.29 TITLE

1.30 NAME

1.31 STREET ADDRESS

1.32 CITY-STATE-ZIP

1.33 TITLE

1.34 NAME

1.35 STREET ADDRESS

1.36 CITY-STATE-ZIP

1.37 TITLE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

1.5 TITLE

1.6 NAME

1.7 STREET ADDRESS

1.8 CITY-STATE-ZIP

1.9 TITLE

1.10 NAME

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1.13 TITLE

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1.28 CITY-STATE-ZIP

1.29 TITLE

1.30 NAME

1.31 STREET ADDRESS

1.32 CITY-STATE-ZIP

1.33 TITLE

1.34 NAME

1.35 STREET ADDRESS

1.36 CITY-STATE-ZIP

1.37 TITLE

5175 Blanding Blvd.

Jacksonville, FL 32210

Kelley, Julie T.

5175 Blanding Blvd.

Jacksonville, FL 32210

5175 Blanding Blvd.

Jacksonville, FL 32210

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Jacksonville, FL 32210

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Edmund L. Toney

1-19-96 904-777-4888

DATE

TELEPHONE

CR2E034 (12/95)