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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # P95000032625 (2)

BINARY DIGITAL LOGIC, INC.

Principal Place RT. 4. BOX 751-E PALATKA FL 321	}	Mailing Address RT. 4. BOX 751-B PALATKA FL 32177-8							
						3. Date Incorporated or Qualified 04/24/1995		te of Last Ro	eport
2. Principal Pla 21	ce of Business	2a. Mailing Address 26				4. FEI Number 59-3308572			plied For t Applicable
Suite, Apt #, etc		Suite, Apt. #, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 A	
City & State		City & State				Election Campaign Financing Trust Fund Contribution		\$5.00 Added t	
7(p)	Country 25	Zip 29	Country 30			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes \(\sigma\) Yo			
	9. Name and Address of Cur	rent Registered Agent		81	Name	10. Name and Address of New RE	gistered A	gent	
	HAM, JOANNIE								
RT. 4, BOX 751-B				B2 Street Ad		iress (P.O. Box Number is Not Acceptal	ole)		
PALA	TKA FL 32177			B3			w	min rain	
				84	City		FL	'	Code
I office or re-	the provisions of Sections 607.0 gistered agent, or both, in the St familiar with, and accept the ob-	ate of Florida. Such change :	was authoriza	ed by	the corpora	poration submits this statement for the pation's board of directors. I hereby acce	ourpose of ot the appo	changing it pirtment as	s registered registered
SIGNATURE ;	guature, typical or printed name of registered	annor and title if applicable	(NOTE: Register	ed Ane	nt signature regu	uired when reinstating)	DATE		
12.	, ,	AND DIRECTORS		I 13.		ADDITIONS/CHANGES TO OFFI	CERS AND	DIRECTOR	S IN 12
TOLLE	D	DELET	E 1.1	IITLE				Change	Addition
NAME	COLLEY, BENJAMIN	•	1.21	NAME					
	RT. 4, BOX 751-B		1.3	STREET	ADDRESS				
l i	PALATKA FL 32177			1.4 CITY - ST - ZIP					
 	D	☐ DELETE		2.1 TITLE		de de la companya de		☐] Change	Addition
NAME	Branham, Denny		2.2	NAME					
	RT. 4. BOX 751-B		2.3	STREET	ADDRESS				

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 arrival 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 emporation 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 3 if ci) anged, or on an attachment with an address.

2. 4 CITY - ST- ZIP

3.3 STREET ADDRESS 3.4. CITY - ST - ZIP

3.1 TITLE

3.2 NAME

4.1 TITLE

4. 2 NAME 4.3 STREET ADDRESS

5.1 TITLE

5.2 NAME 5.3 STREET ADDRESS

61 TITLE

62 NAME

4.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

63 STREET ADDRESS

DELETE

DELETE

DELETE

DELETE

SIGNATURE:

PALATKA FL 32177

OHY-51 742

STREET ADDRESS

STREET ADORESS

STREET ADORESS OF YI STE Z22

STREET ADDRESS

OTY SEZP

CUTY ST ZP

THUE

THEE

T ILE NAME

1011

NAMI

GNATURE AND TYPED OR PRINTED NAME OF GIGNING

4/17/97

9043287270

FILED

Apr 25 1997 8:00am

Secretary of State

Deutime Phone #

Change

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Addition

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