

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

DOCUMENT # P95000034810 (8)

1. Corporation Name

DATA MANAGEMENT TECHNOLOGY, INC.



Principal Place of Business

1001 SOUTH RIDGEWOOD AVENUE  
EDGEWATER FL 32132

Mailing Address

1001 SOUTH RIDGEWOOD AVENUE  
EDGEWATER FL 32132

3. Date Incorporated or Qualified

05/04/1995

3a. Date of Last Report

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

30

4. FEI Number

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

10. Name and Address of New Registered Agent

PALMETTO CHARTER SERVICES INC.  
150 MAGNOLIA AVENUE  
BAYONA BEACH FL 32115-2491

81 Name

NANCY C. DAVIS

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

1100 South Riverside Drive

83

84

City  
Edgewater

FL

85 Zip Code  
32132

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

*Nancy C. Davis, Treas.*  
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

4/29/96

DATE

12. OFFICERS AND DIRECTORS

TITLE D HAYMAN, JACK ☐ DELETE  
NAME  
STREET ADDRESS 1001 S. RIDGEWOOD AVENUE  
CITY-ST-ZIP EDGEWATER FL 32132

TITLE D DAVIS, BILL ☐ DELETE  
NAME  
STREET ADDRESS 1001 S. RIDGEWOOD AVENUE  
CITY-ST-ZIP EDGEWATER FL 32132

TITLE D DAVIS, NANCY ☐ DELETE  
NAME  
STREET ADDRESS 1001 S. RIDGEWOOD AVENUE  
CITY-ST-ZIP EDGEWATER FL 32132

TITLE D HAYMAN, PAT ☐ DELETE  
NAME  
STREET ADDRESS 1001 S. RIDGEWOOD AVENUE  
CITY-ST-ZIP EDGEWATER FL 32132

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

☐ Change ☐ Addition

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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)(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 address.

SIGNATURE:

*Nancy C. Davis, Treas.*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/96  
Date

904-426-0014  
Daytime Phone

CR2E034 (12/95)