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

**PROFIT** CORPORATION



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

ANN	JAL REPORT Secretary of State  1996 DIVISION OF CORPORATIONS						
DOCU 1. Corporatio	MENT # <b>P95</b> (	000049927	(3)				
	NEL SOFTWARE INC.					II <b>no</b> lla Mätha Barab Lood al	
Principal Place	e of Business	Mailing Address					
11528 THOUSAND OAKS DRIVE 11528 THOUSAND OAKS PENSACOLA FL 32514 PENSACOLA FL 32514							
					3. Date incorporated or Qualified 06/23/1995	3a. Date of Last f	Report
Principal Place of Business 21		2a. Mailing Addre	2a. Mailing Address 26		4. FEI Number 579-3327893	3	Applied For Not Applicable
Suite, Apt.	Surte, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & Stat	y & State 28		ate		Election Campaign Financing     Trust Fund Contribution	S5.00 May Be Added to Fees	
Zip 24	Cauntry <b>25</b>	7 <sub>(p)</sub>	Gountry 30		I	; □No	199.032.
	g. Name and Address of C	urrent Registered Agent	81	Name	10. Name and Address of New F	Registered Agent	
WOLFE, LARRY					ress (P.O. Box Number is Not Acceptal	ole)	
200-A JOHN KNOX ROAD TALLAHASSE FL 32303-6643							
TALLAMASSE PL 32303-0043							
			84	City			îp Code
11. Pursuant or registe familiar w SIGNATURE	to the provisions of Sections 607 ered agent, or both, in the State of with, and accept the obligations of, Signature, types or present its of register.	Florida Such change was Section 607.0505 Florida	a Statutes, the above- authorized by the corp statutes. (IEBE Registered Age	oration's boa	ration submits this statement for the purif of directors. Thereby accept the app	rpose of changing its pointment as registere	d agent. I am
12.		S AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFF		ORS IN 12
TITLE	D A	☐ DELI	TE 1. 1 TITLE			☐ Change	ORS IN 12 90 Addition
NAME	SANCTURY, RONALD P		1.2 NAME				[5
STREET ADDRESS		S DR.	i i	LADDRESS			1
CITY-ST-ZIP TITLE	PENSACOLA FL 32514	☐ DELI	14 CITY - 2 1 THLE	ST - ZIP		Change	Addit on C
NAME			2 2 NAME			Onlings	
STREET ADDRESS				ADDRESS			
CITY-ST-ZIP			2.4 CITY-				
TITLE		DELI				Change	Addition
NAME			3.2 NAME				
STREET ADDRESS			33 STREE	T ADDRESS			
CITY - ST - ZIP			3 4 CITY -	ST-ZIP			
TITLE		☐ DEL				Change	Add:tion
NAME			4.2 NAME				
STREET ADDRESS	•			LADDRESS			
CITY - ST - ZIP		DEL	44007-	ST - ZIF		☐ Change	Addition
TITLE			ETE 5 LTITLE 52 NAME				LI NOOMO-1
NAME STREET ADDRESS				1 ADDRESS			
CITY-ST-ZIP	,		5.4 CiTY -				
TITLE	<u> </u>	☐ DEL				☐ Change	Addition
NAME		_	6.2 NAME			,	

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 or this annual report or Jupolemental annual report is true and arcurate and that my signature shall have the some legal effect as if made under oath, that I am an officer or director of the corporation or thy receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 of changed, or fin at attachment with an address.

6.3 STREET ADDRESS

64 CITY ST- 7-P

SIGNATURE:

STREET ADDRESS

RONALD P. SANCTUARY 4/28/96 904-968-3717