

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 # P95000051400 (6)

1. Corporation Name
EXAMS, INC.



Principal Place of Business

320 2ND STREET
DAYTONA BEACH FL 32125-0783

Mailing Address

320 2ND STREET P.O. Box 250783
DAYTONA BEACH FL 32125-0783

2. Principal Place of Business

21 Suite Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 P.O. Box 250783

27 Suite Apt. #, etc.

28 DAYTONA Beach, FL

29 Zip Country

3. Date Incorporated or Qualified

07/01/1995

3a. Date of Last Report

1st one

4. FEI Number

59-3326253

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

KOELKER, DONALD R
320 2ND STREET
DAYTONA BEACH FL 32125-0783

10. Name and Address of New Registered Agent

81 Name DONALD R. KOELKER

82 Street Address (P.O. Box Number is Not Acceptable)
320 2nd St

84 City HOLLY HILL

FL

85 Zip Code 32117

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 DONALD R. KOELKER

(Signature typed or printed name of registered agent or director when not a state official)

Donald R. Koelker July 1, 96

12. OFFICERS AND DIRECTORS

TITLE D
NAME KOELKER, DONALD R
STREET ADDRESS POST OFFICE BOX 783 N/A
CITY-ST-ZIP DAYTONA BEACH FL 32125-0783

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President
1.2 NAME DONALD R. KOELKER
1.3 STREET ADDRESS P.O. Box 250783
1.4 CITY-ST-ZIP DAYTONA Beach, FL 32125-0783

2.1 TITLE Secretary
2.2 NAME EDNA S. KOELKER
2.3 STREET ADDRESS P.O. Box 250783
2.4 CITY-ST-ZIP DAYTONA Beach, FL 32125-0783

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

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

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

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

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: Donald R. Koelker
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

July 1-96 904-238-4407

CR2E034 (12/95)