

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

FILED
May 11 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P95000055516 (5)

1. Corporation Name

AUDIT TECH OF CENTRAL FLA, INC.



Principal Place of Business

Mailing Address

2020 ALOMA AVE
WINTER PARK FL 32792
US

P.O. BOX 1775
MAITLAND FL 32751
US GOLDEN ROD, FL 32733

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Apt. #, etc. *1775*

22 City & State

23 Zip Country

2a. Mailing Address

26 P.O. BOX 1775

27 Suite, Apt. #, etc.

28 City & State GOLDEN ROD, FL
29 Zip 32733 30 Country ORANGE

3. Date Incorporated or Qualified

07/18/1995

4. FEI Number

59-3305370

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 owes or has paid the current year Intangible
Personal Property Tax due June 30.

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

RAY, WILLIAM J
235 S MAITLAND AVE SUITE 214
MAITLAND FL 32751

10. Name and Address of New Registered Agent

81 Name WILLIAM J. RAY
82 Street Address (P.O. Box Number is Not Acceptable) #214
83 2020 ALOMA AVE
84 City MAITLAND FL 85 Zip Code 32792

11. Pursuant to the provisions of Sections 607.0592 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

Signature, typed or printed name of corporation and agent, and title of application

(NOTE: Registered Agent signature required when reinstating)

DATE

4-198

12. OFFICERS AND DIRECTORS

TITLE P
NAME RAY, WILLIAM J
STREET ADDRESS 235 S MAITLAND AVE SUITE 214
CITY-ST-ZIP MAITLAND FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PRESIDENT
1.2 NAME RAY, WILLIAM J.
1.3 STREET ADDRESS 2020 ALOMA AVE
1.4 CITY-ST-ZIP WINTER PARK, FL 32792

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

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 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 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 in an attachment with an address.

CR2E034 (10/97)