

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P95000068956 (8)**
1. Corporation Name

PEGASUS CONSULTING SERVICES, INC.



Principal Place of Business

**34 BELVEDERE LANE
PALM COAST FL 32137**

Mailing Address

**34 BELVEDERE LANE
PALM COAST FL 32137**

2. Principal Place of Business

21 **same**

Suite, Apt., Rm., etc.

22 City & State

23 Zip Country

24 **Flagler**

9. Name and Address of Current Registered Agent

**GUNTARP, PAUL M JR., ESQ
4 OLD KINGS ROAD NORTH
SUITE B
PALM COAST FL 32137**

2a. Mailing Address

26 **same**

Suite, Apt., Rm., etc.

27 City & State

28 Zip

29 **U.S.**

3. Date Incorporated or Qualified

09/07/1995

3a. Date of Last Report

4. FEIN Number

59-3340507

Applied For
Not Applicable

5. Certificate of Status Declared

**\$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

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Numbers Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.011 and 607.012, Florida Statutes, I, the undersigned, being a resident duly qualified to serve in this capacity, do hereby accept the appointment as registered agent, I am familiar with, and accept the obligations of Section 607.011, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE **D**
NAME **HERRIN, KENNETH T**
STREET ADDRESS **1141 BRADENTON ROAD**
CITY, ST, ZIP **DAYTONA BEACH FL 32114**

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

D/P

V/S/T

**Susan R. Herrin
34 Belvedere Lane
Palm Coast, FL 32137**

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Susan R. Herrin
Susan R. Herrin, Vice President

4/15/96 (904) 445-1778

CR2E034 (12/95)