

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
Apr 04 1997 8:00am
Secretary of State

DOCUMENT # P95000070978 (8)

1. Corporation Name

CORE DATA CORPORATION

Principal Place of Business

8500 SATELLITE BLVD
SUITE 200
ORLANDO FL 32837
US

Mailing Address

8500 SATELLITE BLVD
SUITE 200
ORLANDO FL 32837-8461
US

2. Principal Place of Business

21 100 TECHNOLOGY PARK

Suite, Apt. #, etc.

22 SUITE 160

City & State

23 LAKE MARY, FL

24 32746

Country

25 USA

2a. Mailing Address

26 100 TECHNOLOGY PARK

Suite, Apt. #, etc.

27 SUITE 160

City & State

28 LAKE MARY, FL

29 32746

Country

30 USA

9. Name and Address of Current Registered Agent

WILKINS, JOHN P
8500 SATELLITE BLVD.
SUITE 200
ORLANDO FL 32837

J.F. GERRITY
100 TECHNOLOGY PARK
SUITE 160
LAKE MARY, FL 32746

3. Date Incorporated or Qualified

09/14/1995

3a. Date of Last Report

08/12/1996

4. FEI Number

59-3344807

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

10. Name and Address of New Registered Agent

81 Name

J.F. GERRITY

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

100 TECHNOLOGY PARK

83

SUITE 160

84 City

LAKE MARY

FL

85 Zip Code

32746

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

Signature must be printed name of registered agent and be applicable

NOTE: Registered Agent signature required when reinstating

3/3/97
Date

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
WILKINS, JOHN P
STREET ADDRESS
8625 QUAIL VALLEY ROAD
CITY-ST-ZIP
TALLAHASSEE FL 32308

TITLE ☐ DELETE

NAME
JOHNSTON, R. NEILL
STREET ADDRESS
917 VANGI LANE
CITY-ST-ZIP
PALM BAY FL

TITLE ☐ DELETE

NAME
HALBERT, S. RAY
STREET ADDRESS
493 YOUNG STREET
CITY-ST-ZIP
MELBOURNE FL

TITLE ☐ DELETE

NAME
FISHER, PETER
STREET ADDRESS
4141 JUTLAND DRIVE #200
CITY-ST-ZIP
SAN DIEGO CA

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 ☐ Change ☒ Addition

NAME
CFO
GERRITY, JOSEPH F
STREET ADDRESS
5475 U.S. 1
CITY-ST-ZIP
GRANT, FL 32849

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/4/97

Date

Daytime Phone: #

CR2E034 (9/96)