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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000072570 (1)

	CD FILES GROUP, INC	<b>)</b>	•			] 			
Pr	incipal Place of Business	Mailing Address	Mailing Address			- L TEGRESA ING DAVIN BININ SEKUS BESIN ORDIN SOUTH SOUTH SOUTH HORIT BEIN LOGIT			
	330 TOWER LANE SARASOTA FL 34240	6320 TOWER LANE SARASOTA FL 34240				DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified 09/20/1995			
2.	Principal Place of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number		Applied For	
21		26				65-0608037		Not Applicable	
22	Suite, Apt. #, etc.	Suite, Apt #, efc.	Suite, Apt #, etc.			5. Certificate of Status Desired		5 Additionat Required	
23	City & State	City & State				6. Election Campaign Financing Trust Fund Contribution		O May Be ed to Fees	
24	Zip Cou	intry Zip 29	30 Cou	ntry		This corporation owes or has paid the cu     Personal Property Tax due June 30.	rrent year Yes	Intangible  No	
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent				
VESTRAND, MICHAEL 6320 TOWER LN. SARASOTA FL 34240				81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83					
					City	FL	85 Z	ip Code	
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 philipplions of, Section 607 0505, Plorida Statutes.									
SIGNATURE XILLICIACS N. VEST VINITATION (NOTE Registered Agent signature required when reinstating)  DATE  OPEN									
40		OFFICERS AND DIRECTORS	42			ADDITIONS/CHANCES TO DESIGNEDS AN	DIDECT	ODC IN 12	

DELETE Change TITLE 1.1 TITLE COPPINGER, RONALD W STREET ADDRESS **6320 TOWER LANE** 1.3 STREET ADDRESS SARASOTA FL 34240 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE MURCHIE, WILLIAM J 22 NAME STREET ADDRESS **6320 TOWER LANE** 2.3 STREET ADDRESS SARASOTA FL 34240 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE VESTRAND, MICHAEL G 3.2 NAME NAME 6320 TOWER LANE STREET ADDRESS 3.3 STREET ADDRESS SARASOTA FL 34240 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4, 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change ☐ Addition TITLE 61 TITLE NAME 6.2 NAME STREET ADDRESS 63 STREET ADDRESS

14. Thereby 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 empower 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 attaching with an address.

64 CITY-ST-ZIP

SIGNATURE:

CITY-S1-ZIP

MICHAEL G VESTRAND 2-3-98

CR2E034 (10/97)

**FILED** 

Feb 10 1998 8:00am

Secretary of State