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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

P96000000686 (1) DOCUMENT # Corporation Name

11/F8** (F8.8 BAS/4/F68) (A AMALASA	
Werther's bookkeeping services in	٠

Principal Place of Business Mailing Address 6501 NW 29TH TERRACE 6501 NW 29TH TERRACE **GAINESVILLE FL 32606** GAINESVILLE FL 32806 3. Date Incorporated or Qualified 38. Date of Last Report 12/26/1995 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Country 8. This corporation has liability for intangible tax under s 199.032, 25 30 X Yes ☐ No 29 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name WERTHER, MARI E 82 Street Address (P.O. Box Number is Not Acceptable) 6501 NW 29TH TERRACE **GAINESVILLE FL 32606** 83 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. Thereby accept the appointment as registered agent. I am SIGNATURE SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1. 1 TITLE Change Addition NAME WERTHER, MARI E 12 NAME 6501 NW 29TH TERRACE STREET ADDRESS 13 STREET ADDRESS **GAINESVILLE FL 32606** CITY - ST - ZIP 14 CITY-ST-ZIP TITEF DELETE 2 1 TITLE ☐ Change Addition NAME 22 NAME STREET ADDRESS 2.3 STREET ADDRESS CiTY-ST-7IP 2 4 CITY-ST-ZIP DELETE Change TITLE 3. 1 THILE Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY - ST- ZIP TITLE DELETE 4. 1 TITLE Change Addition 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 44 CITY - ST - ZIP TITLE DELETE 5 1 TITLE ☐ Change ■ Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5 4 CITY-ST-7IP TITLE DELETE 6 1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6 3 STREET ADDRESS CITY-ST-ZIP 6 4 CITY - ST - ZIP

SIGNATURE:

Mari E Werther 4-15.96

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 13 if chapter 607 and attachment with an address.

(12/95)CR2E034