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

DOCUMENT # P96000024379 (5)

NATIONAL DATA SYSTEMS, INC.

			· · · · · · · · · · · · · · · · · · ·			AH HUH HU		
Principal Place of Business Mailing Address					e samtesmur ein sones Weilie Mille Mille in	ital arita i tali	AHOR ILHI IM	AN 1811 EN NI
206 FAIRWAY DRIVE LONGWOOD FL 32778		206 FAIRWAY DRIVE LONGWOOD FL 32779-5040						
					3. Date Incorporated or Qualified 03/13/1996	3a. Da	ate of Last f	Report
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number		A	pplied For
21 Cuito Ant	A 010	26			59- 33720	28		ot Applicable
Suite, Apt.	#, €IG	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional lequired
City & Stat	e	City & State	·····		6. Election Campaign Financing			
23		28			Trust Fund Contribution		υυ.cφ hebbA	May Be to Fees
Zip	Country	Zip	Country		8. This corporation has liability for		· · · · · · · · · · · · · · · · · · ·	
24	25]	29 3	0		Florida Statutes	Yes [_] No	
	9. Name and Address of Currer	nt Registered Agent	81 Nar		10. Name and Address of New F	egistered .	Agent	····
CUCHANAN, ERIC				$^{me} \mathcal{D}_{\ell}$	AND J. CONRAD			
	FAIRWAY DRIVE		82 Stre	et Addres	is (P.O. Box Number is Not Accept	able)		
LON	GWÓOD FL 32779		83	1257	WINTERGREEN L	1PY	 	
			03					
			84 City		TER GANDEN	FL	85 Zip	Code 1382
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes	the above-nam	ed corror	ation submits this statement for the	purpose of	changing i	its registered
agent. La	egistered agent, or both, in the State m familiar with, and accept the oblig	of Florida, Such change was autations of, Section 607,0505, Florid	norized by the c da Statutes.	corporation	n's board of directors. I hereby acc	ept the app	ointment as	registered
SIGNATURE	Mail Coma				i	1/14/9	<i>17</i>	
12.	Signature, typed or printed name of registered and OFFICERS AN		Registered Agent signs 13.	ature required		DATE	DIDEATA	
TITLE	D OFFICERS AN	DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OFF	ICEHS AND	Change	Addition
NAME	BUCHANAN, ERIC		1.2 NAME				C Change	nonline
STREET ADDRESS	206 FAIRWAY DRIVE		1.3 STREET ADDRES	92				
CITY-ST-ZIP	LONGWOOD FL 32779		1.4 CITY-ST-ZIP	"				
TITLE	D	DELETE	2.1 TITLE				☐ Change	Addition
NAME	CONRAD, DAVID J		2.2 NAME		•			
STREET ADDRESS	1257 WINTERGREEN WAY		2.3 STREET ADDRES	ss				
CITY-ST-ZIP	WINTER GARDEN FL 34787		2.4 CITY-ST-ZIP					
TITLE		DELETE	3.1 TITLE				Change	Addition
NAME			3.2 NAME					
STREET ADDRESS			3.3 STREET ADDRES	SS				
CITY-ST-ZIP TITLE		DELETE	3.4. CITY-ST-ZIP 4.1 TITLE				Change	Addition
NAME		F1 pricit	4.1 THLE 4.2 NAME				Change	Addition
STREET ADORESS			4.2 NAME 4.3 STREET ADDRES	00				
CITY-ST-ZIP			4.4 City-St-Zip	55				
TITLE	1874 117 C 201 1884 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	DELETE	5.1 TITLE				Change	Addition
NAME			5.2 NAME				<u>.</u> .	
STREET ADDRESS			5.3 STREET ADDRES	ss				
CITY - ST - ZIP			5.4 CITY-ST-ZIP					
TITLE		DELETE	6.1 TITLE				Change	Addition
NAME.			6.2 NAME					
STREET ADDRESS			6.3 STREET ADDRES	ss				
CITY-ST-ZIP			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:

ATURE AND TYPED ON PHINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/14/97 677-8333 XIS3

FILED

Feb 06 1997 8:00am

Secretary of State

n dan 1964 din dang bilik dang bilik dang dang dalih dalih dalih ding ding ding ding dang dang dan dalih