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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

**FILED** 

May 16 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P96000030833 (3)

**ADVANCED VISUAL DISPLAY CORPORATION** 

Principal Place of Business Mailing Address 1870 ALOMA AVENUE. SUITE 120 1870 ALOMA AVENUE, SUITE 120 WINTER PARK FL \$2789 **WINTER PARK FL 32789-4050** 3. Date Incorporated or Qualified 3a. Date of Last Report 04/09/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 Not Applicable Sulte, 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 28 Trust Fund Contribution Added to Fees Zip Country Zιρ Country 8. This corporation has liability for intangible tax under s. 199.032, 24 25 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MARSHALL, BYRD F JR. 201 E. PINE STREET, SUITE 1200 82 Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32801 83 84 Zio Code 85 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, 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 🔲 DELETË 1.1 1111.6 Change Addition COLEY, ELWOOD B JR. NAME 1.2 NAME 1870 ALOMA AVENUE, SUITE 120 STREET ADDRESS 1.3 STREET AUDRESS **WINTER PARK FL 32789** CITY-ST-ZIP 1.4 CITY-\$1-7IP DELETE TITLE 2.1 TITLE Change Addition WELLS, STEPHEN L NAME 2.2 NAME 1870 ALOMA AVENUE, SUITE 120 STREET ADDRESS 2.3 STREET ADDRESS **WINTER PARK FL 32789** CITY-ST-ZIP 2 4 City-St-7/P TITLE DELETE 3 1 111LF ☐ Change Addition NAME 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY-ST-ZIP 3.4. CHY-ST-ZIP TATLE DELETE Change 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP ☐ DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 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.