

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P96000083201

1. Corporation Name

DIGITAL EXPRESS INTERNET SERVICES, INC.

Principal Place of Business

4417 CONSTITUTION LANE  
MARIANNA FL 32448

Mailing Address

4417 CONSTITUTION LANE  
MARIANNA FL 32448

2. Principal Place of Business

21 7500 McElvey Lane

Suite, Apt. #, etc.

22

City & State

23 Panama City Beach, FL

Zip

24 32408

25

USA

2a. Mailing Address

26 7500 McElvey Lane

Suite, Apt. #, etc.

27

City & State

28 Panama City Beach, FL

Zip

29 32408

30

USA

9. Name and Address of Current Registered Agent

KUNDIN, DAVID BROOKS  
906 THOMASVILLE RD  
TALLAHASSEE FL 32303

3. Date Incorporated or Qualified

10/09/1996

4. FEI Number

59-3413497

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 owes the current year Intangible  
Personal Property Tax.

☐ Yes

☒ No

10. Name and Address of New Registered Agent

81 Name

Monica L. Cothran

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

1004 Jenks Avenue

83

84

Panama City

FL

85 Zip Code

32401

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)

DATE

12. OFFICERS AND DIRECTORS

TITLE D  
NAME MEADE, KATHY  
STREET ADDRESS 3435 HICKORY HILL RD  
CITY-ST-ZIP MARIANNA FL

☐ DELETE

TITLE DP  
NAME STOTTLEMIRE, JOHN A  
STREET ADDRESS 4375 ANGELA DRIVE  
CITY-ST-ZIP MARIANNA FL

☐ DELETE

TITLE DVST  
NAME ROCKHILL, KEVIN  
STREET ADDRESS 4375 ANGELA DR  
CITY-ST-ZIP MARIANNA FL

☒ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DVST  
1.2 NAME Kathy Meade  
1.3 STREET ADDRESS 2407 Charco Dr  
1.4 CITY-ST-ZIP Panama City, FL 32405

☒ Change ☐ Addition

2.1 TITLE DP  
2.2 NAME Stottlemire, John A  
2.3 STREET ADDRESS 2409 Charco Dr  
2.4 CITY-ST-ZIP Panama City, FL 32405

☒ Change ☐ Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE D  
4.2 NAME Gunter, Henry  
4.3 STREET ADDRESS 3395 Semind Ln  
4.4 CITY-ST-ZIP Marianna, FL 32448

☐ Change ☒ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Kathy Meade

3/24/99

Date

850-234-3988

Daytime Phone #

CR2E034 (1/98)

FILED  
Apr 08, 1999 8:00 am  
Secretary of State

04-08-1999 90029 022 \*\*\*150.00



DO NOT WRITE IN THIS SPACE