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Apr 25 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000088969 (6)

1. Corporation Name
CORPORATE SYSTEMS SPECIALISTS, INC.

Principal Place of Business
7532 PRESERVES COURT
SARASOTA FL 34243

Mailing Address
POST OFFICE BOX 45186
SARASOTA FL 34277-4186



3. Date Incorporated or Qualified 10/29/1996
3a. Date of Last Report

4. FEI Number 05-0713048
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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business
21 8466 N. Lockwood Ridge Rd
Suite, Apt. #, etc. Suite 326

22 Suite 326
City & State Sarasota, FL

23 Zip 34243 Country USA

24 34243 25 USA

2a. Mailing Address
26 8466 N. Lockwood Ridge Rd
Suite, Apt. #, etc. Suite 326

27 Suite 326
City & State Sarasota, FL

28 Zip 34243 Country USA

29 34243 30 USA

9. Name and Address of Current Registered Agent

REED, PHILIP B V
7532 PRESERVES COURT
SARASOTA FL 34243

10. Name and Address of New Registered Agent

81 Name Adam B. Smith

82 Street Address (P.O. Box Number is Not Acceptable)
4719 3rd Ave NW

83

84 City Bradenton FL 85 Zip Code 34209

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 Adam B. Reed, Adam B. Smith 4-20-97
S.g. name, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-instating) DATE

12. OFFICERS AND DIRECTORS

TITLE President ☐ DELETE
NAME Philip B. Reed, Jr.
STREET ADDRESS 7532 Preserves Court
CITY - ST - ZIP Sarasota, FL 34243

TITLE Secretary ☐ DELETE
NAME Christopher H. Buld
STREET ADDRESS 7532 Preserves Court
CITY - ST - ZIP Sarasota, FL 34243

TITLE Treasurer ☐ DELETE
NAME Adam B. Smith
STREET ADDRESS 4719 3rd Ave NW
CITY - ST - ZIP Bradenton, FL 34209

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP ☐ Change ☐ Addition

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP ☐ Change ☐ Addition

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP ☐ Change ☐ Addition

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP ☐ Change ☐ Addition

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP ☐ Change ☐ Addition

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

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: Adam B. Smith, Adam B. Smith 4-20-97 750-0033 (94)
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)