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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000091927 (9)

COMPUTER DISKOVERIES, INC.

## **FILED** May 15 1998 8:00am Secretary of State



					:	
Principal Plac	e of Business	Mailing Address	<b>"</b>	i janeindir sim amich agite maite maite a	Meir Matte Jürde binen lausik elder einde eines	
3700 STONE WAY 3700 STONE WAY						
ESTERO FL S	33928	ESTERO FL 33928		DO NOT WRIT	DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified		
				11/06/1996		
2. Principat P	Place of Business	2a. Mailing Address		4. FEI Number	Applied For	
21 350	e Cypress Way W.	26 356 Cyp	ress Way We	<i>65-</i> 0747139	Not Applicable	
Sulte, Apt.	#, etc. /	Suite, Apt. #, #tc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & Stat	°2. 2. CI	City & State		6. Election Campaign Financing	\$5.00 May Be	
23 1	PLES, IL	28 Naples	$\mathcal{H}$	Trust Fund Contribution	Added to Fees	
Zip 241	Country	Zip	Country	8. This corporation owes or has p	<b>_</b> ' _ '	
24 271	9. Name and Address of Current	29  <i>39  0</i>	30 Collier	Personal Property Tax due Jun  10. Name and Address of New R		
D41		Hagistered Agent	81 Name	10, Name and Address of New A	egisteren Agent	
PAIE, AMT D				Amy Sirate		
			82 Street /	Address (P.O. Box Number is Not Accepte	10 C T	
6	1ENO 1 E 33920		83	e syriess may w	231	
			84 City A	JAPLES	FL 85 Zip Code	
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					į	
Signature typind or printed name of registered agent and title diagnosciable (NOTE: Registered Agent signature required when reinstating) DATE						
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFF		
TITLE	VP	LJ DELETE	1.1 TITLE	VP	Change L Addition	
NAME	PATNAUDE, JOHN H 8790 STONE WAY		1.2 NAME	JOHN H, PATNAUDE	MACT	
STREET ADDRESS	ESTERO FL		1.3 STREET ADDRESS	356 Cypress way	West	
CITY-ST-ZIP	LOILNO I L	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE	10 History, 1 - 241	Change Addition	
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-ZIP			2. 4 CITY - ST - ZIP			
TITLE		☐ DELETE	3.1 TITLE		Change Addition	
NAME			3.2 NAME		-	
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY - ST - 7IP			
TITLE		☐ DELETE	4.1 TITLE		Change Addition	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 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-ZIP			
TITLE		DELETE	6.1 TITLE		Change Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREFT ADDRESS			
CITY-ST-ZIP	cartify that the information engated with	th this filing stope not suglif	6.4 CITY-S1-ZIP	d in Section 119 07(3)(i) Florida Statutes	I further certify that the information	

Indicated on this annual report or supplied with this tiling does not quality for the exemption stated in Section 119.07(3)(f). Florida Statutes. I further certify that the information indicated on this annual report or suppliemental 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 frustee 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 anythactive fit with an address.