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

06-08-1999 90013 030 ***550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

DOCUMENT # P97000068663

1. Corporation Name
NOT DIGITAL, INC.

Principal Place of Business
**50 S BELCHER RD. STE 124
CLEARWATER FL 33765
US**

Mailing Address
**50 S BELCHER RD. STE 124
CLEARWATER FL 33765
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/07/1997

4. FEI Number

59-3467890

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

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

25

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

30

Country

9. Name and Address of Current Registered Agent

**CANNON, STEPHEN T
365 7TH AVENUE NORTH
SAFETY HARBOR FL 34695**

10. Name and Address of New Registered Agent

81

Name

CANNON, STEPHEN T

82

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

3053 EGRET TERRACE

83

84

City

SAFETY HARBOR

FL

85

Zip Code

34695

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

5-3-99

12. OFFICERS AND DIRECTORS

TITLE **P** ☐ DELETE
NAME **WETZEL, DOUGLAS**
STREET ADDRESS **2537 MULBERRY RD SOUTH**
CITY-ST-ZIP **CLEARWATER FL 34695**

TITLE **VP** ☐ DELETE
NAME **CANNON, STEPHEN**
STREET ADDRESS **365 7TH AVENUE NORTH**
CITY-ST-ZIP **SAFETY HARBOR FL 34095**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

1.1 TITLE **P** ☒ Change ☐ Addition
1.2 NAME **WETZEL, DOUGLAS**
1.3 STREET ADDRESS **2700 EAST GRAND AVENUE**
1.4 CITY-ST-ZIP **CLEARWATER, FL 33759**

2.1 TITLE **VP** ☒ Change ☐ Addition
2.2 NAME **CANNON, STEPHEN**
2.3 STREET ADDRESS **3053 EGRET TERRACE**
2.4 CITY-ST-ZIP **SAFETY HARBOR, FL 34695**

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

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

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

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

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:

STEPHEN CANNON
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-3-99
Date

727-669-7954
Daytime Phone #

CR2E034 (11/98)