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Aug 03 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham, Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P97000108924 (6)**

1. Corporation Name

DATABASE PLUS, INC.



Principal Place of Business

**4035 DUNEWOOD PLACE
FERNANDINA BEACH FL 32034**

Mailing Address

**4035 DUNEWOOD PLACE
FERNANDINA BEACH FL 32034**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/30/1997

2. Principal Place of Business

2a. Mailing Address

21 1627 S 8TH STREET

26 1627 S 8TH ST

4. FEI Number

593483884

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 or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

City & State

City & State

23 FERNANDINA BEACH, FL

28 FERNANDINA BEACH FL

Zip

Country

Zip

Country

24 32034

25 USA

29 32034

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**INCORPORATE FLORIDA, INC.
7190 SEMINOLE BLVD.
SEMINOLE FL 33772**

81 Name

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

83

84 City

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **P** ☒ DELETE
NAME **DYAL, JOHN**
STREET ADDRESS **4035 DUNEWOOD PLACE**
CITY-ST-ZIP **FERNANDINA BEACH FL 32034**

1.1 TITLE **PRESIDENT** ☒ Change ☒ Addition
1.2 NAME **JANICE A. O'CONNELL**
1.3 STREET ADDRESS **1627 S. 8TH STREET**
1.4 CITY-ST-ZIP **FERNANDINA BCH, FL 32034**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE **4000026063** ☐ Change ☐ Addition
5.2 NAME **-08/04/98--01003--042**
5.3 STREET ADDRESS *****550.00**
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
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.

SIGNATURE:

JANICE A. O'CONNELL, Pres 904-277-0003

CF2E034 (10/97)