

04161999-90023-047-\$150.00-\$150.00

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FILED
Apr 16, 1999 8:00 am
Secretary of State

04-16-1999 90023 047 ***150.00

CORPORATION ANNUAL REPORT 1999				Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P98000056779 1. Corporation Name DIGITAL DATA WAREHOUSE, INC.					
Principal Place of Business 501 CENTRAL PARK DRIVE SANFORD FL 32771			Mailing Address 501 CENTRAL PARK DRIVE SANFORD FL 32771		
DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/24/1998					
2. Principal Place of Business 23 State, Apt. #, etc. 22 City & State 23 Zip Country		2a. Mailing Address 26 State, Apt. #, etc. 27 City & State 28 Zip Country		4. FEI Number 54-3531675	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees		7. This corporation owes the current year intangible Personal Property Tax ☐ Yes ☒ No	
8. Name and Address of Current Registered Agent LOKEY, JOHN ALAN 825 MARKHAM WOODS ROAD LONGWOOD FL 32778			10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 88 Zip Code		
11. Pursuant to the provisions of Sections 607.0500 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 provisions of Section 607.0500, Florida Statutes.					
SIGNATURE  DATE 6/17/99					
12. OFFICERS AND DIRECTORS 1. NAME John Alan Lokey ☐ DELETE 2. ADDRESS 825 Markham Woods Rd 3. CITY-STATE-ZIP Longwood FL 32779 ☐ DELETE			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE owner/President ☐ Change ☐ Addition 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-STATE-ZIP ☐ Change ☐ Addition 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-STATE-ZIP ☐ Change ☐ Addition 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-STATE-ZIP ☐ Change ☐ Addition 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-STATE-ZIP ☐ Change ☐ Addition 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-STATE-ZIP ☐ Change ☐ Addition		
I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(a), Florida Statutes. I further certify that the information 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 of the corporation; that I have read this report as required by Chapter 607, Florida Statutes; and that my name appears in the report or Block 12 if changed, or on an attached statement, with all other officers authorized.					
SIGNATURE:  DATE: _____					

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