

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

0100273

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # **S11893**

(2)

1. Corporation Name
DATACON, INC.



Principal Place of Business

**ONE TOWER BRIDGE
#804
WEST CONSHOCKEN PA 19428
US**

Mailing Address

**3783 SURREY LN
SARASOTA FL 34235-2417
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/06/1990

4. FEI Number

65-0225990

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

10. Name and Address of New Registered Agent

2. Principal Place of Business

21 1858 Ringling Blvd.

2a. Mailing Address

26 1858 Ringling Blvd.

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

23 City & State

Sarasota, Fl.

28 City & State

Sarasota, Fl.

24 Zip

34236

Country

USA

29 Zip

34236

Country

USA

9. Name and Address of Current Registered Agent

**R.A. BOBZIN
3783 SURREY LANE
SARASOTA FL 34235**

81 Name

Renea M. Glendinning

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

1858 Ringling Boulevard

83

84 City

Sarasota

FL

85 Zip Code

34236

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 **Renea M. Glendinning**

8/3/98

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

(NOTE: Registered Agent signature required when reinstalling)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D**
NAME **BOBZIN, R.A.**
STREET ADDRESS **3783 SURREY LN**
CITY-ST-ZIP **SARASOTA FL**

☒ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **Director Secretary, Treasurer**
1.2 NAME **Renea M. Glendinning**
1.3 STREET ADDRESS **1858 Ringling Boulevard**
1.4 CITY-ST-ZIP **Sarasota, Fl. 34236**

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

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

☐ Change ☐ Addition

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

☐ Change ☐ Addition

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

☐ Change ☐ Addition

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

☐ Change ☐ Addition

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

☐ Change ☐ Addition

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: **Renea M. Glendinning**

8/3/98 (941) 365-4617

CR2E034 (5/98)