

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **S14846** (7)

1. Corporation Name
MANAGEMENT SERVICES GROUP, INC.



Principal Place of Business
**8630 AUTUMN GREEN DR.
JACKSONVILLE FL 32256-9561**

Mailing Address
**8630 AUTUMN GREEN DR.
JACKSONVILLE FL 32256-9561**

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 Zip Country

9. Name and Address of Current Registered Agent

**GRIFFITH, MARK S
8630 AUTUMN GREEN DR.
JACKSONVILLE FL 32256-9561**

3. Date Incorporated or Qualified
11/20/1990

3a. Date of Last Report
08/11/1995

4. FEI Number
59-3038071

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

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 607.0507 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 607.0506, Florida Statutes.

SIGNATURE

Signature type (type or print name of agent and sign) (type or print name of agent and sign)

DATE

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**DPST
GRIFFITH, MARK S
8630 AUTUMN GREEN DR.
JACKSONVILLE FL 32256-9561**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**V
GRIFFITH, MARK S
8630 AUTUMN GREEN DR.
JACKSONVILLE FL 32256-9561**

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11 TITLE

12 NAME

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14 CITY - ST - ZIP

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24 CITY - ST - ZIP

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32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARK S. GRIFFITH, PRESIDENT

4/28/96

904 362-1417

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CR2E034 (12/95)

CP