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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Morthani

Secretary of State DIVISION OF CORPORATIONS

1996 DOCUMENT #
1. Corporation Name S27123

(6)

THE MARKHAM GROUP, INC.

FILED Apr 25 1996 8:00 am Secretary of State



Principal Place of Business Maling Address							
518 CRYSTAL GROVE BLVD LUTZ FL 33549		518 CRYSTAL GROVE BLVD LUTZ FL 33549					
					3. Date Incorporated or Qualified	3a. Date of Las	t Report
					01/22/1991	05/01/1	1995
2. Principal Pla	ice of Business	2a. Mailing Address			4. FEI Number		Applied For
21		26			59-3044369		Not Applicable
Suite, Apt #	t, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	1 1	.75 Additional ee Required	
City & State		Oty & State	Oty & State		6. Election Campaign Financing		
23		28			Trust Fund Contribution		.00 May Be
Zip	Country	Zφ	Coun	try	8. This corporation has liability for it		
24	25	29	30		Florida Statutes		
	9. Name and Address of Current	Registered Agent			10. Name and Address of New R	egistered Agent	
				Mame Name			
EVANS, DAVID M.			8	Street Add	ress (P.O. Box Number is Not Acceptab	ie)	
	STAL GROVE BLVD		-	13			
LUTZ FL	33549		ľ	13			
			[8	14 City		FL 85	Zip Code
11. Pursuant te	o the provisions of Sections 607.0502 a	and 607.1508, Florida Statu	tes, the above	e named corpo	ration submits this statement for the pur	nose of changing	its registered office
or registere	ed agent, or both, in the State of Florid- h, and accept the obligations of, Sectio	i. Such change was authori	zed by the co	rporation's boa	rd of directors. Thereby accept the appoint	óintment as régiste	ered ägent. I am
SIGNATURE _	Signative, typed or proced have of registrated against m	o neal trappal laboration (N	Út Hogodosei A	şkirid Sigirat ire resulti	al when remaining	DATE	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFF		
T.TLE	P	☐ DETEIE	1. 1 7 1	ı.E		☐ Chan	nge 🔲 Addition
NAME	TAGGART, JOSEPH W		1.2 NAV				
STREET ADDRESS	8875 HIDDEN RIVER PARKWA	γ		EET ADDRESS			
CITY-ST-7IP TUTUE	TAMPA FL	DELETE	2 1 TI:	r - ST - ZiP		Char	nge 🗍 Addition
NAME	VST Evans, Judith G	L. Dettere	2 2 NAA				igo Li Zidateon
STREET ADDRESS	518 CRYSTAL GROVE BLVD			EFT ADDRESS			
CITY - ST - ZIP	LUTZ FL			(-ST-ZIP			
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NAME			3.2 NAS	AE			
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NAME			4.2 NAt				
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CITY - ST - ZIP		ריין ארובזוי		r - S(- ZIF		FT (%	nga [T] Addition
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NAME OXDEST ADDRESS			5.2 NA3	1			į
STREET ADDRESS				EET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	5.4 GH 6.1 TH	Y-ST-ZIF		Char	nge 🔲 Addition
NAME		becel	6.2 NAF	l l		L.J Srigi	.go
STREET ADDRESS				EE! ADDRESS			
CITY-ST-ZIP				v - S.1 - ZIP			
14 Lda barah	y codify that the information supplied a	it. But force is a destroite for	roched and c	loos not re inline	for the exemption stated in Section 119	07/97b) Florida Si	tatutae I further

I do bereby certify that the information supplied with this firing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 early 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 opan attachment with an address.

SIGNATURE:

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR >ECRETANY