FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS S48131 (4) **DOCUMENT #** Corporation Name DIMENSION BROKERAGE SERVICES, INC. Principal Place of Business Mailing Address 4190 BELFORT ROAD 4190 BELFORT ROAD 450 450 JACKSONVILLE FL 32216 JACKSONVILLE FL 32216 Date Incorporated or Qualified 04/25/1991 3a. Date of Last Report 04/04/1995 2. Principal Place of Business 2a, Mailing Address 4. FEI Number Applied For 59-3061520 21 26 Not Applicable Suite, Apt. #. etc. Suite Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing П 23 28 Trust Fund Contribution Added to Fees Country Country 8. This corporation has liability for intangible tax under s. 199.032, 24 25 29 Florida Statutes Yes No 30 9, Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 Name BINCAZK, RODNEY W. R2 Street Address (P.O. Box Number is Not Acceptable) 4190 BELFORT RD. SUITE 450 83 JACKSONVILLE FL 32216 84 City Zip Code 85 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. Thereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Stip at neil type corporated name of negligible diagont and tille mappicable DATE OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 **PDST** DELETE 1016 1 1 TIFLE Addition BINCZAK, RODNEY W. NAME 1.2 NAME 4190 BELFORT ROAD, SUITE 450 STREET ADDraids 1.3 STREET ADDRESS JACKSONVILLE FL CINEST ZE 1.4 CITY - ST - ZiP DELETE Addition 2 1 TITLE Change Change BINCZAK, RODNEY W. NAM 2.2 NAME 1965 BEACHWAY RD:#5 STREET ADDRESS 2.3 STREET ADDRESS JACKSONVILLE PL Offy SE-ZP 2.4 CITY - ST - ZiP 7016 DELFTE 3 1 TITLE ☐ Change [Addition NAME 3.2 NAME STREET ACRORESS 3.3 STREET ADDRESS 00° x 5° 70° 3 4 CITY - ST - ZiP $\Pi^*(F$ DELFTE 4 1 TITLE ☐ Change Addition 4.2 NAME STREET ADDRESS 4.3 STHEET ADDRESS C1r-St 7P 4.4 CITY - ST - ZiP [] DELETE Tritt 5 1 TITLE ☐ Change ☐ Addition NAM 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-51-2-8 54 CITY-ST-ZIP DELETE TITLE Change 6 1 THILE ☐ Addition NAM 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

polied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under of properties or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE:

 I do hereby certify that the information is certify that the information indicated on the cath, that I an an officer or director of the appears in Block 12 or Block 13 if prange

GNATURE AND TYPES OF PRINTED NAME OF SIGNING OFFICER OF DRIEGTOR

1-22-96 904-296-4100

(12/95)

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