

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # S68858 (7)

1. Corporation Name

APPLIED COMPUTER SYSTEMS, INC.



Principal Place of Business

2709 ROCKY POINT DR.
S100
TAMPA FL 33607
US

Mailing Address

2709 ROCKY POINT DR.
S100
TAMPA FL 33607
US

2. Principal Place of Business

21

Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26

3301 W. Gandy Blvd.

Suite, Apt. #, etc.

27 City & State

TAMPA, FL.

28 Zip

33611

29 Country

30

3. Date Incorporated or Qualified

07/26/1991

3a. Date of Last Report

04/04/1995

4. FEI Number

59-3073809

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

9. Name and Address of Current Registered Agent

O'DONNELL, WILLIAM, JR.
4201 WEST CYPRESS STREET
TAMPA FL 33607

10. Name and Address of New Registered Agent

81

Name

O'DONNELL, William, JR.

82

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

3301 W. Gandy Blvd.

83

84

City

TAMPA

FL

85

Zip Code

33611

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

William O'Donnell, Jr.

WILLIAM O'DONNELL, JR.

1/19/96

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME D
O'DONNELL, WILLIAM, JR.
STREET ADDRESS 2709 ROCKY POINT DRIVE, STE. 100
CITY-ST-ZIP TAMPA FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME D
O'DONNELL, William, JR.
1.3 STREET ADDRESS 3301 W. Gandy Blvd.
1.4 CITY-ST-ZIP TAMPA, FL. 33611

2.1 TITLE ☐ Change ☒ Addition
2.2 NAME S
KAREN A. WATSON
2.3 STREET ADDRESS 3301 W. GANDY Blvd.
2.4 CITY-ST-ZIP TAMPA, FL 33611

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

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

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

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

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.07(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 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:

William O'Donnell, Jr.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

1/19/96

Daytime Phone #

813-287-1775

CR2E034 (12/95)