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FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT** 1999



Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **S70652** 1. Corporation Name

DAVID C. PARKER & ASSOCIATES DATA PROCESSING CON SULTANTS, INC.

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Principal Place of Business Mailing Address)
1116 WOODBE TALLAHASSEE		1116 WOODBERN WAY TALLAHASSEE FL 32304				
TALLATINGSEE	FACCATIAGGLE TE 32304			DO NOT WRITE IN TH	IIS SPACE	
					3. Date Incorporated or Qualifed	
		.			08/05/1991	
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Applied For
21	and the second s	26			59-3101350	Not Applicable
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired [1]	\$8.75 Additional Fee Required
22 City & Sta	te	City & State			6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country		8. This corporation owes the current year	
24	25		30		Personal Property Tax	[] Yes [] No
	9. Name and Address of Curre	nt Registered Agent	81	Name	10. Name and Address of New Registere	o Agent
PAR	KER, DAVID C.					
1116 WOODBERN WAY			82	Street Addr	ess (P.O. Box Number is Not Acceptable)	
TAL	LAHASSEE FL 32304		83	•	•	
•			84	City		. 85 Zip Code
					_. F	L
11. Pursuant	to the provisions of Sections 607.050 registered agent, or both, in the State	02 and 607.1508, Florida Statutes of Florida, Such change was aut	s, the above	-named corporation	oration submits this statement for the purpose on's board of directors. I hereby accept the app	of charging its registered
agent. La	im familiar with, and accept the obliga	ations of, Section 607.0505, Florid	da Statutes		and decided of chaddle of the day decided upp	omane it as rogistores
SIGNATURE	Signature, typed or printed name of registered age	AND WELL THE TAXABLE PROPERTY OF THE PROPERTY	alan an raise and	ra data a	distancementation DATE	
12.	was a second and the	ND DIRECTORS	13.	signature requires	ADDITIONS/CHANGES TO OFFICERS (AND D RECTORS IN 12
TITLE	P	[] DELETE	1 1 TITLE			[] Change [] Addition
NAME	PARKER, DAVID C.		1.2 NAME		80000289;	24282
STREET ADDRESS	1116 WOODBERN WAY		1.3 STREET	ADDRESS	-66762499-	-01044~-024
CITY-ST-ZIP	TALLAHASSEE FL 32304		1.4 CITY-ST	ZIP		A ****150.00
TITLE		☐ DELFTE	2 1 TITLE			[1] Change [1] Addition
NAME			2 2 NAME			
STREET ADDRESS			23 STREET	1		
CITY-ST-ZIP TITLE		□ DELETE	2 4 CITY-ST 3 1 TITLE	1.ZIP		☐ Change ☐ Addition
NAME		•	3.2 NAME	1		
STREET ADDRESS			33STREET	ADDRESS		
C/TY-ST-ZIP			3.4 CITY-\$1	r- z iP		
TITLE]	☐ DELETE	4 1 TITLE			[] Change [Addition
NAME			4 2 NAME			
STREET ADDRESS			43STREET			
CITY-ST-ZIP TITLE		☐ DELETE	44 CITY-ST	-ZIP		Dhange Addition
NAMÉ		L.) Detele	5 1 TITLE 5 2 NAME			Egiphange Egiphodicon
STREET ADDRESS			53 STREET	ADORESS .		
CITY-ST-ZIP			54 CITY-ST			
TITLE		[] DELETE	6 1 TITLE	.		[] Change [] Addition
NAME			6.2 NAME			-

14. Thereby 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 suppliemental annual report is true and accurate and that my signature shall have the same logal effect as if made under oa h; 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 have appears in Block 12 or Block 13 if changes, or on an attachment with an address, with all other like empowered.

SIGNATURE:

63 STREET ADORESS

SIGNATURE:

STREET ADDRESS

DAVID O. PARKER

850,575.0745