

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

FILED

Mar 23 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # S93028 (6)

1. Corporation Name
PEICO AUTOMOTIVE DATA SERVICES, INC.



Principal Place of Business 7685 MATOAKA ROAD SARASOTA FL 34243 US	Mailing Address 7685 MATOAKA ROAD SARASOTA FL 34243 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 4904 Greencroft Road 22 Suite, Apt. #, etc. 23 Sarasota, Florida 24 Zip 34235 Country USA	2a. Mailing Address 26 4904 Greencroft Road 27 Suite, Apt. #, etc. 28 Sarasota, Florida 29 Zip 34235 Country USA	3. Date Incorporated or Qualified 11/12/1991 4. FEI Number 59-3093925 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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9. Name and Address of Current Registered Agent CABLISH, HOMER G. 4301 32ND ST. W., STE. D-5 BRADENTON FL 34205	10. Name and Address of New Registered Agent 81 Name Homer G. Cablish Jr. 82 Street Address (P.O. Box Number is Not Acceptable) 83 Suite 2, 84 City Sarasota, FL 85 Zip Code 34210
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11. Pursuant to the provisions of Sections 607.012 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or agent. I, a

SIGNATURE 

HOMER G. CABLISH JR. EA 16 JAN 1998

12. OFFICERS AND DIRECTORS TITLE P NAME CULLEN, PETER D STREET ADDRESS 7685 MATOAKA ROAD CITY-ST-ZIP SARASOTA FL 34243 [X] DELETE 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 P 1.2 NAME PETER D. CULLEN 1.3 STREET ADDRESS 4904 Greencroft Road 1.4 CITY-ST-ZIP Sarasota, Florida 34235 2.1 TITLE [] Change [] Addition 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 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
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14. I hereby 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 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, 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 on an attachment with an address.

SIGNATURE:


PETER D. CULLEN

16 JAN 1998 94 351 3630

CR2E034 (10/97)