

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # V39401 (7)

1. Corporation Name  
ACUSOFT, INC.



Principal Place of Business

10764 OAK GLEN CIR  
ORLANDO FL 32817

Mailing Address

9941 LK. GEORGIA DR.  
ORLANDO FL 32817

2. Principal Place of Business

2a. Mailing Address

21 12249 Science Dr

26 12249 Science Dr

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite 130

27 Suite 130

City & State

City & State

23 Orlando, FL

28 Orlando, FL

Zip Country

Zip Country

24 32826

25

29 32826

30

9. Name and Address of Current Registered Agent

O'QUINN, MICHAEL A  
200 S ORANGE AVE  
SUITE 2600  
ORLANDO FL 32801

3. Date Incorporated or Qualified

05/28/1992

3a. Date of Last Report

04/12/1995

4. FEI Number

59-3126286

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

10. Name and Address of New Registered Agent

81 Name

Lana Y. Liu

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

12249 Science Dr, Suite 130

83

84 City

Orlando

FL

85 Zip Code  
32826

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 607.0502, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and full application

(If Officer Registered Agent Signature required when not a director)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME  
DP  
LIU, JESSE W  
9941 LK. GEORGIA DR.  
ORLANDO FL 32817

TITLE ☐ DELETE

NAME  
DTS  
LIU, LANA YON  
9941 LK. GEORGIA DR.  
ORLANDO FL 32817

TITLE ☐ DELETE

NAME  
V  
GEISLER, BURL O  
1395 WHITE OAK DR.  
WINTER SPRINGS FL 32708

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

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

T/S

4381 Willa Creek Dr., #205  
Winter Springs, FL 32708

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 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LANA Liu

3/16/96 (407) 658-9888

CR2E034 (12/95)