

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

CORPORATION  
ANNUAL REPORT  
1995



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

APPROVED  
AND  
FILED

55 MAY -1 PM 9:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

DOCUMENT # V67566

(2)

1. Corporation Name

PROGRAM TRADING CORP.

Principal Place of Business

777 S HARBOUR ISLAND BLVD.  
S-250  
TAMPA FL 33602

Mailing Address

1110 KEYES AVE  
S-250  
WINTER PARK FL 32789  
US

3. Date Incorporated or Qualified  
09/25/1992

3a. Date of Last Report  
05/01/1994

4. FEI Number  
59-3145580

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

2. Principal Place of Business

21. 111 NORTH ORANGE AVENUE

2a. Mailing Address

26. 111 NORTH ORANGE AVENUE

Suite, Apt. #, etc.

22. 825

Suite, Apt. #, etc.

27. 825

City & State

23. ORLANDO, FLORIDA

City & State

28. ORLANDO, FLORIDA

Zip

24. 32801

Country

25. ORANGE

Zip

29. 32801

Country

30. ORANGE

9. Name and Address of Current Registered Agent

RENNEKER, ROBERT J.  
1110 KEYES AVE  
S-250  
WINTER PARK FL 32789

10. Name and Address of New Registered Agent

81. Name

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

83.

84. City

FL

85. Zip Code

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

Signature types to printed name of registered agent and file if applicable.

DATE Registered Agent Signature Required when transferring.

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. NAME  
DP  
RENNEKER, ROBERT J.  
2. STREET ADDRESS  
1110 KEYES AVE.  
3. CITY, ST, ZIP  
WINTER PARK FL

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY, ST, ZIP

1. NAME  
2. STREET ADDRESS  
3. CITY, ST, ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY, ST, ZIP

1. NAME  
2. STREET ADDRESS  
3. CITY, ST, ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY, ST, ZIP

1. NAME  
2. STREET ADDRESS  
3. CITY, ST, ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY, ST, ZIP

1. NAME  
2. STREET ADDRESS  
3. CITY, ST, ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY, ST, ZIP

1. NAME  
2. STREET ADDRESS  
3. CITY, ST, ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY, ST, ZIP

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(4)(b), 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 or Block 14 or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RENNEKER

4/30/95

4078410998