2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 02, 2020
Secretary of State
2978781004CC

DOCUMENT# P08000033488

Entity Name: AUTO DATA DIRECT SERVICES, INC.

Current Principal Place of Business:

1830 EAST PARK AVENUE
SUITE 1
TALLAHASSEE, FL 32301

Current Mailing Address:

1830 EAST PARK AVENUE
SUITE 1
TALLAHASSEE, FL 32301 US

FEI Number: 32-0245909

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	CEO, CHAIRMAND OF THE BOARD
Name	BROCKMAN, ROBERT T
Address	6700 HOLLISTER
City-State-Zip:	HOUSTON TX 77040

Title	PRESIDENT
Name	NALLEY, ROBERT M
Address	6700 HOLLISTER
City-State-Zip:	HOUSTON TX 77040

Title	TREASURER
Name	BURNETT, ROBERT D
Address	6700 HOLLISTER
City-State-Zip:	HOUSTON TX 77040

Title	VP
Name	TAYLOR, JIM
Address	1830 EAST PARK AVENUE SUITE 1
City-State-Zip:	TALLAHASSEE FL 32301

Title	DIRECTOR
Name	DEATON, ALFRED L III
Address	6700 HOLLISTER
City-State-Zip:	HOUSTON TX 77040

Title	EXECUTIVE VICE PRESIDENT
Name	BARRAS, NORMAN T
Address	6700 HOLLISTER
City-State-Zip:	HOUSTON TX 77040

Title	CFO, SECRETARY
Name	MOSS, M CRAIG
Address	6700 HOLLISTER
City-State-Zip:	HOUSTON TX 77040

Title	VP
Name	KERR, RICK
Address	1830 EAST PARK AVENUE SUITE 1
City-State-Zip:	TALLAHASSEE FL 32301

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: MARK BALES — ASSISTANT SECRETARY — 04/02/2020

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	ASSISTANT SECRETARY
Name	BALES, MARK F
Address	1 REYNOLDS WAY
City-State-Zip:	KETTERING OH 45430