

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

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CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Murdison Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 829174 (2)

1. Corporation Name
SAFECARD SERVICES INCORPORATED

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

300001455338
04/13/95 -01011--001
***1000.00 ***200.00

Principal Place of Business	Mailing Address
3001 E. PERSHING BLVD. P.O. BOX 5399 CHEYENNE WY 82001 US	3001 E. PERSHING BLVD. P.O. BOX 5399 CHEYENNE WY 82001 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 12/12/1972	3a. Date of Last Report 03/01/1994
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2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt #, etc	26 7596 Centurion Parkway
22 City & State	27 City & State
23 Jacksonville, Florida	28 Jacksonville, Florida
24 Zip	29 32256
25 Country	30 USA

4. FEI Number 13-2650534	Applied For <input type="checkbox"/> Not Applicable
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 has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301**

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 _____ (NOTE: Registered Agent signature required when constituting) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE DCOO	NAME CAHILL, GERALD R.	11 TITLE C/CEO	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 3001 E. PERSHING BLVD.	CITY ST ZIP CHEYENNE WY	12 NAME Paul G. Kahn	
		13 STREET ADDRESS 7596 Centurion Parkway	
		14 CITY ST ZIP Jacksonville, Florida 32256	
TITLE V	NAME SEEHOUSEN, JOANNE	21 TITLE M/CFO/T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 6400 N.W. 6TH WAY	CITY ST ZIP FT. LAUDERDALE FL	22 NAME G. Thomas Frankland	
		23 STREET ADDRESS 7596 Centurion Parkway	
		24 CITY ST ZIP Jacksonville, Florida 32256	
TITLE D	NAME BACON, WILLIAM T., JR.	31 TITLE M	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 135 S. LASALLE ST.	CITY ST ZIP CHICAGO IL	32 NAME Francis J. Marino	
		33 STREET ADDRESS 7596 Centurion Parkway	
		34 CITY ST ZIP Jacksonville, Florida 32256	
TITLE V	NAME BRESLIN, AGNETA K.	41 TITLE P/OOO	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 3001 E. PERSHING BLVD.	CITY ST ZIP CHEYENNE WY	42 NAME John R. Birk	
		43 STREET ADDRESS 7596 Centurion Parkway	
		44 CITY ST ZIP Jacksonville, Florida 32256	
TITLE DP	NAME STALCUP, W.M.	51 TITLE V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 3001 E. PERSHING BLVD.	CITY ST ZIP CHEYENNE WY	52 NAME Robert M. Frechette	
		53 STREET ADDRESS 7596 Centurion Parkway	
		54 CITY ST ZIP Jacksonville, Florida 32256	
TITLE V	NAME BOCHAK, JOHN	61 TITLE V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 3001 E. PERSHING BLVD.	CITY ST ZIP CHEYENNE WY	62 NAME Richard M. Interdonato	
		63 STREET ADDRESS 3001 E. Pershing Blvd.	
		64 CITY ST ZIP Cheyenne, Wyoming 82001	

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)(a), 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: *Lisa Ormand*
LISA ORMAND AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Lisa Ormand - Vice President & Corporate Secretary 4/6/95 (904) 928-1833

LW 4-12-95

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Item 12

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**Dorothy S. Schechter
7596 Centurion Parkway
Jacksonville, Florida 32256**

V

**Harry Strauss
7596 Centurion Parkway
Jacksonville, Florida 32256**

V

**Susan R. Gottesmann
7596 Centurion Parkway
Jacksonville, Florida 32256**

V

**Marc F. Joseph
7596 Centurion Parkway
Jacksonville, Florida 32256**

V

**Don N. Merritt, Jr.
7596 Centurion Parkway
Jacksonville, Florida 32256**

V

**David C. Thompson
7596 Centurion Parkway
Jacksonville, Florida 32256**

VS

**Lisa Ormand
7596 Centurion Parkway
Jacksonville, Florida 32256**

D

**William T. Bacon, Jr.
7596 Centurion Parkway
Jacksonville, Florida 32256**

D

**Marshall L. Burman
7596 Centurion Parkway
Jacksonville, Florida 32256**

D

**Robert L. Dilenschneider
7596 Centurion Parkway
Jacksonville, Florida 32256**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



D
Eugene Miller
7596 Centurion Parkway
Jacksonville, Florida 32256

D
Thomas F. Petway, III
7596 Centurion Parkway
Jacksonville, Florida 32256

D
John Ellis (Jeb) Bush
7596 Centurion Parkway
Jacksonville, Florida 32256

D
Dr. Adam W. Herbert
7596 Centurion Parkway
Jacksonville, Florida 32256

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