FILE NOW: FILING FEE IS \$61.25 Feb 27 1998 8:00am NONPROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # 242513 Alm Worth, Inc. 3. Date Incorporated or Qualified Applied For 005463 Not Applicable Principal Place of Business \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 7. Is this nonprofit corporation a homeowners association? This corporation owes or has paid the current year in angible Personal Property Tax due June 30. Yes Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent and 617.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered tons of Section 517.0503, Florida Statutes. 11. Pursuant to the provisions of Sections istered agent, or both, in the militar with and accept. OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE PD ☐ Change ☐ Addition TITLE 11 DILE C. Warren Kochlijr. AD. NAME 12 NAME 2850 South Ocean Blud, #407 1.3 STREET ADDRESS PAlm Beach, FL 33480 CITY-ST-ZIP 1.4 CITY-ST-ZIP ☐ DELETE TITLE 2.1 TITLE ☐ Change ☐ Addition Case, Bernard 2850 South Ocean Blow, #312 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE 80000244424fe -03/02/98--01053--021 TITLE 3.1 TITLE Addition NAME Sullivan Diana 2950 5: ocean Blud, #212 P.B., FL 23480 3.2 NAME 3.3 STREET ADDRESS ***61.25 CiTY-ST-ZIP 3.4. CITY - ST - ZIP DELETE TITLE 41 TITLE ☐ Change Addition Preiffer Charles #414 2850 S. Ocen Blus, #414 NAME King, William 2850/5. Ocen Blue, #502 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP Palm Beach, FL 33400 ☐ DELETE TITLE 5.1 THILE Mckinney, John 2850 S. Sican Blud, #204 P.B., FL 33480 5.2 NAME Heimlich, Richard STREET ADDRESS 5 3 STREET ADDRESS CITY-ST-ZIP 5.4 City - St - 7/P

14. Thereby certify that the information supplied with this filting 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 suppliemental 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 employed to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 13 if chapted or, or an affecting the statute of the corporation of the receiver or trustee employed to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in

62 NAME Kronenberg, Donald 63 STREET ADDRESS 2850 S. OCEN Blud, #214 Change

Addition

■ DELETE

TITLE

CITY-ST-ZIP

NAME Defrancesco, Mary STREET ADDRESS 2850 S. Ocean Blud, \$103

SIGNATURE: SIGNATURE: CWAPREN LOOK JR. MD. 2/13/98 561-588-8924