

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Mar 24 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # **299284** (0)
1. Corporation Name
POWERHOUSE INC



Principal Place of Business
**7300 MICCOSUKEE RD.
TALLAHASSEE FL 32308
US**

Mailing Address
**7300 MICCOSUKEE RD.
TALLAHASSEE FL 32308
US**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 12/01/1965	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 22-1011370	
22	City & State	27	City & State	5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No	

9. Name and Address of Current Registered Agent DAVENPORT, CHRISTOPHER F. 7380 MICCOSUKEE RD. TALLAHASSEE FL 32308				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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	☐ Change ☐ Addition
NAME	DAVENPORT, CHRISTOPHER	1.2 NAME	
STREET ADDRESS	7380 MICCOSUKEE RD.	1.3 STREET ADDRESS	
CITY-ST-ZIP	TALLAHASSEE, FL 00000	1.4 CITY-ST-ZIP	
TITLE	ATD	2.1 TITLE	☐ Change ☐ Addition
NAME	DAVENPORT, LOUISE M	2.2 NAME	
STREET ADDRESS	7380 MICCOSUKEE RD.	2.3 STREET ADDRESS	
CITY-ST-ZIP	TALLAHASSEE, FL 00000	2.4 CITY-ST-ZIP	
TITLE	CVD	3.1 TITLE	☐ Change ☐ Addition
NAME	METTLER, JOHN W, III	3.2 NAME	
STREET ADDRESS	950 THIRD AVE.	3.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK, NY 00000	3.4 CITY-ST-ZIP	
TITLE	ASD	4.1 TITLE	☐ Change ☐ Addition
NAME	METTLER, CORNELIA D	4.2 NAME	
STREET ADDRESS	215 EAST 72ND ST	4.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY	4.4 CITY-ST-ZIP	
TITLE	VD	5.1 TITLE	☐ Change ☐ Addition
NAME	METTLER, PETER W.	5.2 NAME	
STREET ADDRESS	140 ROYAL PALM WAY	5.3 STREET ADDRESS	
CITY-ST-ZIP	PALM BCH FL	5.4 CITY-ST-ZIP	
TITLE	STD	6.1 TITLE	☐ Change ☐ Addition
NAME	STARK, WILLIAM E	6.2 NAME	
STREET ADDRESS	2965 SHAMROCK N., SUITE 9	6.3 STREET ADDRESS	
CITY-ST-ZIP	TALLAHASSEE, FLORIDA 00000	6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing 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 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: William E. Stark

3/10/98

850.877.7455

CR2E034 (10/97)