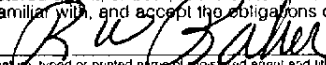


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Apr 03 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 # 360253 (9) 1. Corporation Name ALLEN CREEK PROPERTIES, INC.					
Principal Place of Business 1802 U.S. HIGHWAY 10 HOLIDAY FL 34601			Mailing Address 1802 U.S. HIGHWAY 10 HOLIDAY FL 34601		
2. Principal Place of Business 21 2535 Success DR Suite, Apt. #, etc. 22 City & State 23 ODESSA FL Zip 24 33556 Country 25 PASCO		2a. Mailing Address 26 2535 Success DR Suite, Apt. #, etc. 27 City & State 28 ODESSA FL Zip 29 33556 Country 30 PASCO		3. Date Incorporated or Qualified 02/26/1970 4. FEI Number 59-1890721 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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No	
9. Name and Address of Current Registered Agent BAKER, RICHARD W. 1802 U.S. HWY. 10 HOLIDAY FL 34601			10. Name and Address of New Registered Agent 81 Name RICHARD W BAKER 82 Street Address (P.O. Box Number is Not Acceptable) 2535 Success DR 83 84 City ODESSA FL 85 Zip Code 33556		
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 reinstating) DATE					
12. OFFICERS AND DIRECTORS					
TITLE	PD	☐ DELETE			
NAME	SCHERER, CHRIS				
STREET ADDRESS	1802 US 10				
CITY-ST-ZIP	HOLIDAY FL				
TITLE	STD	☐ DELETE			
NAME	BAKER, RICHARD W				
STREET ADDRESS	1802 US 10				
CITY-ST-ZIP	HOLIDAY FL				
TITLE		☐ DELETE			
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE		☐ DELETE			
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE		☐ DELETE			
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
1.1 TITLE	P/D	☒ Change ☐ Addition			
1.2 NAME	CHRIS SCHERER				
1.3 STREET ADDRESS	2535 Success DR				
1.4 CITY-ST-ZIP	ODESSA FL 33556				
2.1 TITLE	S/T/D	☒ Change ☐ Addition			
2.2 NAME	RICHARD W BAKER				
2.3 STREET ADDRESS	2535 Success DR				
2.4 CITY-ST-ZIP	ODESSA FL 33556				
3.1 TITLE		☐ Change ☐ Addition			
3.2 NAME					
3.3 STREET ADDRESS					
3.4 CITY-ST-ZIP					
4.1 TITLE		☐ Change ☐ Addition			
4.2 NAME					
4.3 STREET ADDRESS					
4.4 CITY-ST-ZIP					
5.1 TITLE		☐ Change ☐ Addition			
5.2 NAME					
5.3 STREET ADDRESS					
5.4 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 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 

CR2E034 (10/97)