FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **PROFIT** Feb 25 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # M84387 (3) TAMARAC, INC. Principal Place of Business Mailing Address % L. FRANK CHOPIN % L. FRANK CHOPIN 440 ROYAL PALM WAY, STE. 200 PALM BEACH FL 33480 440 ROYAL PALM WAY, STE. 200 DO NOT WRITE IN THIS SPACE PALM BEACH FL 33480 3. Date Incorporated or Qualified US 06/08/1988 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For Not Applicable 21 26 65-0113023 Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Country 8. This corporation owes or has paid the current year Intangible X Yes □ No Personal Property Tax due June 30. 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CHOPIN, L. FRANK CHOPIN, MILLER & YUDENFREUND Street Address (P.O. Box Number is Not Acceptable) 82 440 ROYAL PALM WAY, STE 200 83 PALM BEACH FL 33480 City 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, 1 am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. (NOTE Registered Agent signature required ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS ☐ Addition DELETE Change TITLE 1.1 TITLE CHOPIN, L. FRANK NAME 1.2 NAME 440 ROYAL PALM WAY, STE 200 STREET ADDRESS 1.3 STREET ADDRESS PALM BEACH FL 33480 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 2.1 T(TLE TITLE PDS GARDNER, CLAIRE B. 2.2 NAME NAME 315 S. LAKE DRIVE STREET ADDRESS 2.3 STREET ADDRESS PALM BEACH FL 33480 CITY-ST-ZIP 2 4 CITY - \$1 - ZIP DELETE Change Addition 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE ☐ Change Addition 4.1 TITLE TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE TITLE 5.1 31TLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE ☐ Change ☐ Addition TITLE 6.1 THILE

> 6.2 NAME 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

oplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information impental annual report is Ltd are accurate and that my signature shall have the same legal effect as if made under oath; that I am an improve the company of the control of t

NAME

STREET ADDRESS

 I hereby certify that the into indicated on this annual reofficer or director of the co-

CITY - ST - ZIP