FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED
95 MAY -1 PM 2:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000045922

1. Corporation Name

2201 CORPORATION

Principal Place of Business	Mailing Address
5388 115th Avenue North Clearwater, Florida 34620	P. O. Box 13193 St. Petersburg, Florida 33733

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 6/14/94	3a. Date of Last Report: N/A
4. FEI Number: 59-3254970	☐ Applied For ☐ Not Applicable
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 has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No	

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

P. G. Swanson
5388 115th. Avenue North
Clearwater, Florida 34620

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: P. G. Swanson Chairman/Director 5/15/95
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 / NAME / STREET ADDRESS / CITY ST ZIP	C/D P. G. Swanson 5815 Hornwood Drive Houston, Texas 77081	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY ST ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	D Jeffery D. Swanson 441 33rd. Street North St. Petersburg, Florida 33713	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY ST ZIP	☐ Change ☐ Addition 800001504078 -06/02/95--01008--003 ****225.00- ****225.00
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	D Florence B. Salmonson 1700 Waterford Drive Vero Beach, Florida 32966	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY ST ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	D Dorothy Swanson Curtiss 58 Hines Drive Okeechobee, Florida 34972	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY ST ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	D R. C. Craigie 3215 Pinellas Point Drive S. St. Petersburg, Florida 33712	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY ST ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP		61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY ST ZIP	☐ Change ☐ Addition

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)(i), Florida Statutes. I further certify that the information indicated on the 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: P. G. Swanson Chairman/Director 5/15/95 (813) 323-5393
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #