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

**FILED** FLORIDA DEPARTMENT OF STATE Jan 26 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (6)596912 J.H. HARRELL AND ASSOCIATES, INC. Principal Place of Business Mailing Address 8435-4TH STREET N 8435-4TH STREET N ST PETERSBURG FL 33702-3609 ST PETERSBURG FL 33702-3609 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/11/1978 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-1866691 Not Applicable Suite, Abt. #, etc. Suite, Apt, #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution 23 Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year intangible X Yes □ No 29 30 24 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name BILLEB, KENNETH G. JR. 8435 4TH STREET NORTH, SUITE B 82 Street Address (P.O. Box Number is Not Acceptable) ST. PETERSBURG FL 33702 83 84 City Zip Code 85 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 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Addition Change TITLE 1.1 TITLE BILLEB, JR KENNETH G. NAME 1,2 NAME 5117 70TH PLACE N. STREET ADDRESS 1.3 STREET ADDRESS 33781 PINELLAS PARK FL 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE 2.1 TITLE TITLE NAMÉ BILLEB, ROCHELLE C. 2.2 NAME STREET ADDRESS 5117 70TH PLACE N. 2.3 STREET ADDRESS PINELLAS PARK FL 2. 4 CITY-ST-ZIP CITY - ST - ZIP DELETE Change TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4, CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY-ST-ZIP DELETE Change ☐ Addition 5.1 TITLE TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIF TITLE Addition DELETE 6.1 TITLE Change

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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 13 if changed, or on an attachment with an address.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

NAME

STREET ADDRESS

CITY-ST-ZIP