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Apr 15 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 # P97000016178 (0)

1. Corporation Name
BENECON, INC.

Principal Place of Business	Mailing Address
3805 UNIVERSITY BLVD WEST JACKSONVILLE FL 32217	3805 UNIVERSITY BLVD WEST JACKSONVILLE FL 32217

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/13/1997

2. Principal Place of Business	2a. Mailing Address
21 9173 Audubon Park Lane	26 9173 Audubon Park Lane
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: Jacksonville, FL	28 City & State: Jacksonville, FL
24 Zip: 32257 25 Country	29 Zip: 32257 30 Country

4. FEI Number: 59-3427361 ☐ 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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
WALLACE, ROBERT 3805 UNIVERSITY BLVD WEST JACKSONVILLE FL 32217	81 Name: CONSTANCE C. SLIMMON 82 Street Address (P.O. Box Number is Not Acceptable): 9173 Audubon Park Lane 83 84 City: Jacksonville FL 85 Zip Code: 32257

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: Constance C. Slimmon — 1/15/98
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	President	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	CONSTANCE C. SLIMMON		1.2 NAME	
STREET ADDRESS	9173 Audubon Park Lane		1.3 STREET ADDRESS	
CITY-ST-ZIP	Jacksonville, FL 32257		1.4 CITY-ST-ZIP	
TITLE	Vice President	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	Robert F. Slimmon		2.2 NAME	
STREET ADDRESS	9173 Audubon Park Lane		2.3 STREET ADDRESS	
CITY-ST-ZIP	Jacksonville, FL 32257		2.4 CITY-ST-ZIP	
TITLE		☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
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	
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			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: Constance C. Slimmon — 1/15/98

CR2E034 (10/97)