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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

4196 HERSCHEL STREET

JACKSONVILLE FL 32201

Suite, Apt. #, etc.

City & State

2. Principal Place of Business

P.O. BOX 371

21

22



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

Mailing Address

P.O. BOX 371

2a. Mailing Address

Suite, Apl. #, etc.

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4196 HERSCHEL STREET

JACKSONVILLE FL 32201-0371

FILED Jan 15 1997 8:00am Secretary of State

OCUMENT #	153866	
Dorporation Name		

WILLIAM E. ARNOLD COMPANY

	1000 100 BINA 1904 100 BINA 180		
3.	Date incorporated or Qualified 04/14/1949	3a.	Date of Last Report 1/23/1996
4.	FEI Number 59-0598523	•	Applied For Not Applicable
5.	Certificate of Status Desired	X	\$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 i Florida Statutes	ntangil Yes	ole tax under s. 199.032, ☐ No
10.	Name and Address of New Re	gistere	ed Agent

I 18019) NEGO EKIDĀ IŅĀS KĀRI KORI SISTĀ SISTĀ SISTĀDI DIDA DIDA DIDA GIRA GRAŅĀ KĀRĀ DADA

City & State 23 28 Zip Country Zip Country 24 25 29 30 9. Name and Address of Current Registered Agent arnold, William E., Jr. 81 Name 4745 ORTEGA BLVD. 82 Street Address (P.O. Box Number is Not Acceptable) JACKSONVILLE FL 83 84 City 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 farmfair with, and accept the obligations of, Section 607,0505, Florida Statutes.

SIGNATURE Sign it are dyped to printee harme or registers at a plantased offerit applicative. (NOTE Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE 1.1 THLE Change ARNOLD, WILLIAM E., JR. NAME 1.2 NAME 4745 ORTEGA BLVD. STREET ADDRESS 1.3 STREET ADDRESS JACKSONVILLE FL CHY-ST-ZP 1.4 CITY ST-ZIP TITLE DELFTE 2.1 TITLE Change Addition FRAZIER, WILLIAM R. NAME 2.2 NAME 4143 SHERWOOD ROAD STREET ADDRESS 2.3 STREET ADDRESS JACKSONVILLE FL CITY - ST - ZIF 2.4 CITY-ST-ZIP DELLETE TILLE Change ■ Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CHY-S1-7P 4.4 CITY - ST - ZIP DELETE TITLE Change Addition 5.1 THUE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CiTY+ST-ZIP 5.4 CITY - ST-ZIP TITLE DELETE Addition 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

14. I do 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 Blo

SIGNATURE: