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

**FILED** Mar 02 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # 217877 (O) ROPER-MCALLISTER, INC. Principal Place of Business Mailing Address 120 S. DILLARD ST. 120 S. DILLARD ST. P.O. BOX 770218 P.O. BOX 770218 WINTER GARDEN FL 34777 WINTER GARDEN FL 34777-0218 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/05/1958 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 59-6070383 Not Applicable 21 26 Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible ☐ No 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent ROPER. BERT E 120 S DILLARD 82 Street Address (P.O. Box Number is Not Acceptable) WINTER GARDEN FL 34787 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 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. (NOTE: Registered Agent signature required when reinstating) CR2E034 (10/97 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition TITLE 1.1 TITLE ELROD, JEAN 1.2 NAME NAME 536 BUTLER ST STREET ADDRESS 1.3 STREET ADDRESS WINDERMERE FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change \_\_\_ Addition TITLE 2.1 TITLE ENGSTROM, DEAN C. NAME 2.2 NAME 120 S. DILLARD ST. STREET ADDRESS 2.3 STREET ADDRESS WINTER GARDEN FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE ROPER, BERT E. 3.2 NAME NAME 120 S. DILLARD ST. STREET ADDRESS 3.3 STREET ADDRESS WINTER GARDEN FL CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition DUPPENTHALER, D.E. NAME 4. 2 NAME 120 S. DILLARD ST. STREET ADDRESS 4.3 STREET ADDRESS WINTER GARDEN FL CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Addition TITLE 51 TOLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE ☐ Change Addition 6.1 TITLE TITLE

14. 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 employmental annual report is the 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 employment 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.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

NAME

STREET ADDRESS CITY-ST-ZIP