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

PROFIT CORPORATION ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

FILED May 08 1998 8:00am Secretary of State

	1998	SE BI THE	DIVISION OF	COMPOR	TATIONS			
1. Corporation	MENT # SSE'S, INC.	252362	(9)					
Principal Place	e of Business		Mailing Address			(LEADINA LEBEL BINCE HEADY HINCO BILLO HEAD BIN	Bil Alfil Glâll Blaif âl	AN BARN IDAL
2015 SE HAWTHORNE ROAD GAINESVILLE FL 32641 GAINESVILLE FL 32641 GAINESVILLE FL 32641						DO NOT INDITE IN	THE CDACE	
US			US			DO NOT WRITE IN 3. Date Incorporated or Qualified	THIS SPACE	
						10/20/1961		
2. Principal Pl	lace of Business		2a. Mailing Address			4. FEI Number	Ā	pplied For
21			26			59-0949764		lot Applicable
Suite, Apt.			Suite, Apt. #, etc.			5. Certificate of Status Desired		Additional lequired
City & State	9 		City & State			6. Election Campaign Financing Trust Fund Contribution		May Be to Fees
Zip	⊢	Country	Zip	-	untry	8. This corporation owes or has paid the		
24	25 Name and 4	Address of Current F	29 Registered Agent	30	· · · · · · · · · · · · · · · · · · ·	Personal Property Tax due June 30. 10. Name and Address of New Regist		No
			legistered Agent		81 Name	IV. Name Blid Address Of New Hogist	GIOU AGOIL	
CREVASSE JR, JOSEPH M 2015 SE HAWTHORNE RD GAINESVILLE FL					62 Street Add	dress (P.O. Box Number is Not Acceptable)		
					511861 Add	aress (P.O. Box Number is Not Acceptable)		
					83			
					84 City		85 Zip	Code
]			
11. Pursuant t office or re	o the provisions o	l Sections 607.0502 a r both, in the State of	ind 607,1508, Florida Statut Florida, Such change was	tes, the a authorize	bove-named cor d by the corpora	poration submits this statement for the purpation's board of directors. I hereby accept the	ose of changing le appointment a:	its registered s registered
agent. I ar	m familiar with, an	d accept the obligation	ons of, Section 607.0505, FI	orida Sta	tules.			-9
SIGNATURE	Signalure, typed or printe	nd name of registered agent a	nd tille il applicable (NOI	IE Registere	d Agent signature requ	ulred when reinstating)	DATE	
12.		OFFICERS AND D		13.		ADDITIONS/CHANGES TO OFFICER:	S AND DIRECTO	RS IN 12
TITLE	8		☐ DELETE	1.1 TI	ITLE		Change	Addition
NAME		ELLISON MARGAR		1.2 N	Υ .			
STREET ADDRESS	2015 SE HAV			1.3 S	TREET ADDRESS			
TITLE	GAINESVILLE	. PL UUUUU						
itire 1		.,	Doute	_	ITY-ST-ZIP	·	Channe	Addition
MALE:	CREVASSE J		DELETE	2.1 Ti	ITLE		Change	Addition
NAME STREET ADDRESS		R, JOSEPH M	DELETE	2.1 Ti 2.2 N	itle Iame	·	☐ Change	Addition
STREET ADDRESS	CREVASSE J 2015 SE HAV GAINESVILLE	R, JOSEPH M VTHORNE	DELETE	2.1 Ti 2.2 N 2.3 S	ITLE		Change	Addition
1	2015 SE HAV	R, JOSEPH M VTHORNE	☐ DELETE	2.1 Ti 2.2 N 2.3 S	ITLE IAME TREET ADDRESS CITY-ST-ZIP		☐ Change	Addition
STREET ADDRESS CITY-ST-ZIP	2015 SE HAV	R, JOSEPH M VTHORNE		2.1 Ti 2.2 N 2.3 S 2.4 C	ITLE IAME TREET ADDRESS CITY-ST-ZIP ITLE			
STREET ADDRESS CITY-SI-ZIP TITLE	2015 SE HAV	R, JOSEPH M VTHORNE		2.1 Ti 2.2 Ni 2.3 Si 2.4 Ci 3.1 Ti 3.2 Ni	ITLE IAME TREET ADDRESS CITY-ST-ZIP ITLE			
STREET ADDRESS CITY-ST-ZIP TITLE NAME	2015 SE HAV	R, JOSEPH M VTHORNE	☐ DELETE	2.1 Ti 2.2 Ni 2.3 S 2.4 C 3.1 Ti 3.2 Ni 3.3 S	ITLE IAME TREET ADDRESS CITY-ST-ZIP ITLE AME		Change	Addition
STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE	2015 SE HAV	R, JOSEPH M VTHORNE		2.1 Ti 2.2 Ni 2.3 Si 2.4 Ci 3.1 Ti 3.2 Ni 3.3 Si 3.4. Ci	ITLE AME TREET ADDRESS CITY-ST-ZIP DTLE AME TREET ADDRESS CITY-ST-ZIP TILE			
STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME	2015 SE HAV	R, JOSEPH M VTHORNE	☐ DELETE	2.1 TI 2.2 N. 2.3 S 2.4 C 3.1 TI 3.2 N. 3.3 S 3.4. C 4.1 TI	ITLE IAME TREET ADDRESS CITY-ST-ZIP ITLE AME TREET ADDRESS CITY-ST-ZIP ITLE ITLE ITLE ITLE ITLE ITLE ITLE ITLE		Change	Addition
STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS	2015 SE HAV	R, JOSEPH M VTHORNE	☐ DELETE	21 TI 22 M 23 S 2 4 C 31 TI 32 M 33 S 34 C 41 TI 4.2 M 43 SI	ITLE IAME TREET ADDRESS CITY-ST-ZIP ITLE AME TREET ADDRESS CITY-ST-ZIP ITLE ITLE		Change	Addition
STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP	2015 SE HAV	R, JOSEPH M VTHORNE	☐ DELETE	21 TI 22 M 23 S 2 4 C 31 TI 32 M 33 S 34 C 41 TI 4.2 M 43 SI	ITLE IAME TREET ADDRESS CITY-ST-ZIP ITLE AME TREET ADDRESS CITY-ST-ZIP ITLE IAME TREET ADDRESS ITY-ST-ZIP ITY-ST-ZIP		Change	Addition
STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE	2015 SE HAV	R, JOSEPH M VTHORNE	☐ DELETE	21 TI 22 N 23 S' 24 C 31 TI 32 N 33 S' 34 C 41 TI 42 N 43 SI	ITLE IAME TREET ADDRESS CITY-ST-ZIP ITLE AME TREET ADDRESS CITY-ST-ZIP ITLE IAME TREET ADDRESS ITY-ST-ZIP ITLE ITY-ST-ZIP		☐ Change	Addition Addition
STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE	2015 SE HAV	R, JOSEPH M VTHORNE	☐ DELETE	21 TI 22 N. 23 S' 24 C 31 TI 32 N. 33 S' 34 C 41 TI 42 N. 43 SI 44 CI 51 TI 52 N.	ITLE IAME TREET ADDRESS CITY-ST-ZIP ITLE AME TREET ADDRESS CITY-ST-ZIP ITLE IAME TREET ADDRESS ITY-ST-ZIP ITLE ITY-ST-ZIP		☐ Change	Addition Addition
STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME NAME NAME	2015 SE HAV	R, JOSEPH M VTHORNE	☐ DELETE	21 TI 22 N. 23 S' 24 C 31 TI 32 N. 33 S' 34 C 41 TI 42 N. 43 SI 44 CI 51 TI 52 N. 53 SI	ITLE IAME TREET ADDRESS CITY-ST-ZIP ITLE AME TREET ADDRESS CITY-ST-ZIP ITLE IAME TREET ADDRESS ITY-ST-ZIP ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE		Change	Addition Addition Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	2015 SE HAV	R, JOSEPH M VTHORNE	☐ DELETE	21 TI 22 N. 23 S' 24 C 31 TI 32 N. 33 S' 34 C 41 TI 42 N 43 SI 44 CC 51 TI 52 N. 53 SI 54 CC 61 TI	ITLE IAME TREET ADDRESS CITY-ST-ZIP ITLE AME TREET ADDRESS CITY-ST-ZIP ITLE IAME TREET ADDRESS ITY-ST-ZIP ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE TREET ADDRESS ITY-ST-ZIP ITLE		☐ Change	Addition Addition
STREET ADDRESS CHY-SI-ZIP TITLE NAME NAME	2015 SE HAV	R, JOSEPH M VTHORNE	☐ DELETE	21 TI 22 N. 23 S' 24 C 31 TI 32 N. 33 S' 34 C 41 TI 42 N. 43 SI 44 CC 51 TI 52 N. 53 SI 54 CC 61 TI 62 N.	ITLE IAME TREET ADDRESS CITY-ST-ZIP ITLE AME TREET ADDRESS CITY-ST-ZIP ITLE IAME TREET ADDRESS ITY-ST-ZIP ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE AME AME		Change	Addition Addition Addition
STREET ADDRESS CHY-SI-ZIP TITLE NAME STREET ADDRESS CHY-SI-ZIP TITLE	2015 SE HAV	R, JOSEPH M VTHORNE	☐ DELETE	21 TI 22 N. 23 S' 24 C 31 TI 32 N. 33 S' 34 C 41 TI 42 N. 43 SI 51 TI 52 N. 53 ST 54 C 61 TI 62 N. 63 SS	ITLE IAME TREET ADDRESS CITY-ST-ZIP ITLE AME TREET ADDRESS CITY-ST-ZIP ITLE IAME TREET ADDRESS ITY-ST-ZIP ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE TREET ADDRESS ITY-ST-ZIP ITLE		Change	Addition Addition Addition

indicated on this annual report or supplies with this ming does not quality in the exemple legal effect is 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: Magner & Illesin

Margaret C. Ellison 4/17/98