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

May 06 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 # (6)381742 WOODARD & LANE, INC. Principal Place of Business Mailing Address 17200 S.E. 58TH AVE. P.O. BOX 1356 17200 S.E. 58TH AVE. P.O. BOX 1356 SUMMERFIELD FL 34491 SUMMERFIELD FL 34491 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/07/1971 2. Principal Place of Business 2a. Mailing Address Applied For 59-1409431 21 26 Not Applicable 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 8. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Country This corporation owes or has paid the current year Intangible □ No 24 25 29 30 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent LANE, THOMAS J. **B1** Name 17200 S.E. 58TH AVE. Street Address (P.O. Box Number is Not Acceptable) SUMMERFIELD FL 34491 84 City 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 little if applicable (NOTE: Registered Agent a gnature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. P DELETE Change Addition TITLE 1.1 TIFLE LANE, THOMAS J NAME 1.2 NAME 17200 SE 58TH AVE STREET ADDRESS 1.3 STREET ADDRESS SUMMERFIELD FL CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE **DUNCAN, THOMAS** NAME 2.2 NAME 17200 SE 58TH AVE STREET ADDRESS 2.3 STREET ADDRESS SUMMERFIELD FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition **3.1 TITLE** TITLE LANE, ROBERTA W NAME 3.2 NAME 17200 SE 58TH AVE STREET ADDRESS 3.3 STREET ADDRESS SUMMERFIELD FL CITY-ST-ZIP 3.4. DITY-ST-ZIP DELETE TITLE 4.1 TITLE Change __ Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETÉ Change ___ Addition 51 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Addition Change TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. Thereby 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 suppliemental 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:

428-98

FILED