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

WINTER HAVEN FL

CITY-ST-ZIP

SIGNATURE:

FILED Apr 21 1998 8:00am PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # (9) A 5. INC. Principal Place of Business Mailing Address 2901 HWY 31 S PO BOX 2220 ARCADIA FL 34265 ARCADIA FL 34265 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/17/1973 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-1504027 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 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 30 Yes 29 24 25 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name VARNER, JAMES S **505 LITTLE LAKE COURT** 82 Street Address (P.O. Box Number is Not Acceptable) WENTER HAVEN FL 33880 83 Zip Code 85 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) DATE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Addition Change DILE 1.5 TITLE VARNER, EDWARD O. NAME 12 NAME CR2E034 PO BOX 2220 N/A STREET ADDRESS 1.3 STREET ADDRESS ARCADIA FL CITY-ST-ZIP 1.4 CITY - ST - ZIP TITLE DELETE 2.1 TITLE Change Addition VARNER, PHILLIP E. NAME 2.2 NAME PO BOX 2220 N/A STREET ADDRESS 2.3 STREET ADDRESS ARCADIA FL 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 31 TITLE VARNER, DAVID O. 3.2 NAME NAME PO BOX 2220 N/A STREET ADDRESS 3.3 STREET ADDRESS ARCADIA FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE Change Addition TITLE varner, steven e. 4. 2 NAME NAME 30505 TURTLE DOVE LANE STREET ADDRESS 4.3 STREET ADDRESS **PUNTA GORDA FL** 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 51 TITLE VARNER, IRIS NAME 5.2 NAME PO BOX 2220 N/A STREET ADDRESS 5.3 STREET ADDRESS ARCADIA FL CITY - ST - ZIP 5.4 City-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE VARNER, JAMES S. 6.2 NAME STREET ADDRESS 505 LITTLE LAKE COURT 6.3 STREET ADDRESS

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 attactyment with an address.

1.8.98