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

FILED PROFIT Apr 17 1998 8:00am ELORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT** # (5) BANCLINE CORPORATION Principal Place of Business Mailing Address 773 SO KIRKMAN RD PO BOX 616747 **STE 101** ORLANDO FL 32961-6747 DO NOT WRITE IN THIS SPACE ORLANDO FL 32811-2068 3. Date Incorporated or Qualified 08/28/1974 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 21 26 59-1551366 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 30 Personal Property Tax due June 30. Yes 29 g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 PAQUETTE, EDWARD G. 2619 NORFOLK ROAD **B2** Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32803 63 64 City Zip Code 85 11. Pursuant to the provisions of Sociions 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, Sociion 607.0505, Florida Statutes. Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE Change Addition 11 TITLE PAQUETTE, EDWARD G., JR. NAME 1.2 NAME 1269 BEECH HAVEN RD NE STREET ADDRESS 1.3 STREET ADDRESS ATLANTA GA CITY - ST - ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITL€ PAQUETTE, EDWARD G NAME 2.2 NAME 2619 NORFOLK ROAD STREET ADDRESS 2.3 STREET ADDRESS ORLANDO FL CITY-S1-ZIP 2 4 CITY-ST-ZIP DELETE TITLE Change Addition 3.1 TITLE PAQUETTE, EDWARD G NAME 3.2 NAME 2619 NORFOLK ROAD STREET ADDRESS 3.3 STREET ADDRESS ORLANDO FL CITY - ST - ZIP 3.4. CITY - ST - ZIP DELETE THILE 4.1 TITLE Change Addition PAQUETTE, GARY T NAME 4. 2 NAME 2619 NORFOLK RD STREET ADDRESS 4.3 STREET ADDRESS ORLANDO FL CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Addition TIFLE Change 5.1 TITLE PAQUETTE, BETTIE ANNE NAME 5.2 NAME 2619 NORFOLK RD STREET ADDRESS 5.3 STREET ADDRESS ORLANDO FL CITY-ST-ZIP 54 CITY-ST-ZIP

64 CITY-ST-ZIP 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 attachment with an address.

61 TITLE

6.2 NAME

6.3 STREET ADDRESS

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

DELETE

4-13-98

Change

Addition