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

PROFIT CORPORATION ANNUAL REPORT

1998

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 517138

PENNINGTON CORPORATION

FILED May 04 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 702 GARDEN ST. 702 GARDEN ST. TITUSVILLE FL 32796 TITUSVILLE FL 32796 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/25/1976 2. Principal Place of Business 2a. Mailing Address Applied For FEI Number Not Applicable 59-1723813 26 Suite, Apt. #, etc. Suite, Apl. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Country Country This corporation owes or has paid the current year Intangible 29 Personal Property Tax due June 30. 24 25 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 PENNINGTON, ROBERT G. 3580 BURKHOLM ROAD 82 Street Address (P.O. Box Number is Not Acceptable) MIMS FL 32754 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 regenered agent and title diapplication (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE 1.1 TITLE Change Addition TITLE PENNINGTON, ROBERT G. 1.2 NAME NAME **\$580 BURKHOLM RD** 1.3 STREET ADDRESS STREET ADDRESS MIMS FL CITY-ST-ZIP 1.4 CITY - ST - ZIP Change ■ Addition DELETE 2.1 TITLE TITLE PENNINGTON, JUANITA L. NAME 2.2 NAME 3580 BURKHOLM RD STREET ADDRESS 2.3 STREET ADDRESS MIMS FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 4.1 TITLE Change Addition TITLE 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP Change DELETE Addition TITLE 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST- ZIP CITY-ST-ZIP DELETE Change Addition TITLE 6 1 TILLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS

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 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 truetee 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 will an address. Block 12 or Block 13 if change

6.4 CITY - ST - ZIP

EUNINGTON