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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 533319

(0)

SATSUMA, INCORPORATED

FILED Apr 17 1997 8:00am Secretary of State

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Principal Place of Business Mailing Address						
SATSUMA INC. 1836 US HWY 17 S POMONA PK FL 32181 US		PO BOX 500 PO BOX 500 SATSUMA FL 32189-0500 US		Date Incorporated or Qualified	3a. Date of Last Report	
1				05/09/1977	03/22/1996	
2.	Principal Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26 P.O. BOX 968	ox 968		59-1741902	Not Applicable
22	Suite, Apt. #, etc.	Suite, Apt. #, etc.	ite, Apt. #, etc.		5. Certificate of Status Desired [\$8.75 Additional Fee Required
23	City & State	Cily & State 28 Pomona Park		FI	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24	Zip Country 25		untry () E		This corporation has liability for inta Florida Statutes	
Name and Address of Current Registered Agent BRIGGS, JOHN L.				10. Name and Address of New Registered Agent 81 Name		
				Name		
922 ATLANTIC BANK BLDG. JACKSONVILLE FL 32202			82	2 Street Address (P.O. Box Number is Not Acceptable)		
1	ONDITION TO UP TO		83			
			84	City		FL 85 Zip Code
11	I. Pursuant to the provisions of Sections 607 office or registered agent, or both, in the Second Learning to the country of the second the sec	0502 and 607.1508, Florida Statutes, the tate of Florida, Such change was authorized bliggliggs of Spotian 607.0505, Florida St	above ed by	e-named cor the corpora	rporation submits this statement for the purp ation's board of directors. I hereby accept t	pose of changing its registered he appointment as registered

SIGNATURE Signature, typed or printed name of registering agent and tick if applicable (NOTE High stored Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12' 12. 13. ☐ DELETE 11 THLE Change Addition TITLE RIDGEWAY, STANLEY L. NAME 1.2 NAME **BAKER ROAD** 1.3 STREET ADDRESS STREET ADDRESS SATSUMA FL CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE RIDGEWAY, SHANNON C NAME 2.2 NAME 524 NW 32ND AVENUE STREET ADDRESS 23 STREET ADDRESS GAINESVILLE FL CITY-ST-2IP 2 4 CITY-ST-ZIP DELFTE Change Addition TITLE 3.1 TITLE RIDGEWAY, JEAN C NAME 3.2 NAME BAKER ROAD STREET ADDRESS 3.3 STREET ADDRESS SATSUMA, FL 00000 CITY-ST-ZIP 3.4. CITY - ST - ZIP TITLE DELETE 4.1 TITLE Change ___ Addition NAME RIDGEWAY, D. BRYAN 4. 2 NAME 201 SARATOGA DRIVE STREET ADDRESS 4.3 STREET ADDRESS SATSUMA FL CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 Title NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP DELETE Change Addition TITLE 61 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS

14. I do 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.