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

STREET ADDRESS

CITY-ST-ZIP

DALLAS TX

Block 12 or Block 13 if changed, or on an artichment with an address

FILED Mar 24 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # 538285 (8)SUN COAST CLOSURES, INC. Principal Place of Business Mailing Address 7350 26TH COURT EAST 7350 26TH COURT EAST SARASOTA FL 34243 SARASOTA FL 34243 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/29/1977 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 59-1746124 21 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 Country Zip Country Zip 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) 82 PLANTATION FL 33324 вэ 84 City 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 tille if applicable (NOTE: Registered Agent signature required when reinstating) (10/97) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. X DELETE Change X XAddition TITLE 1.1 TITLE **SWIREN YOUR BUNNEY** K X NAME 1.2 NAME CRZE034 Steve Bartlett X #700X S. XWESTMONELANDXAVE. X STREET ADDRESS 1.3 STREET ADDRESS 2700 South Westmoreland Ave X IDALKASXTX X CITY-ST-ZIP 1.4 CITY - ST - Z(P Dallas, TX 75376 DELETE Change Addition TITLE 2.1 TITLE PARISH, JAMES R. NAME 22 NAME 2700 S. WESTMORELAND AVENUE STREET ADDRESS 2.3 STREET ADDRESS **DALLAS TX** CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition DC 3.1 TITLE TITLE IRELAND, JAMES D. NAME 3.2 NAME 1111 CHESTER AVE STREET ADDRESS 3.3 STREET ADDRESS CLEVELAND OH CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE MILLER, JAMES H. NAME 4. 2 NAME 2700 S. WESTMORELAND AVE. STREET ADDRESS 4.3 STREET ADDRESS DALLAS TX CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE 5.1 TITLE Change Addition TITLE PIRKAU, ARNO F. NAME 5.2 NAME 7350 26TH COURT EAST STREET ADDRESS 5.3 STREET ADDRESS SARASOTA FL CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE ___ Addition 6.1 TITLE Change TITLE LESOK, EDDIE M. NAME 6.2 NAME 2700 S. WESTMORELAND AVE

6.3 STREET ADDRESS

3/4/1900

-0.41 355 7166

6.4 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