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

FILED
Jun 26 1998 8:00am
Secretary of State

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

PROFIT
CORPORATION
ANNUAL REPORT
1998

DOCUMENT # **539412** **(7)**

1. Corporation Name
ATHLETIC ATTIC PROPERTIES, INC.

Principal Place of Business	Mailing Address
18 NW 33RD COURT PO BOX 14503 GAINESVILLE FL 32604	18 NW 33RD COURT PO BOX 14503 GAINESVILLE FL 32604

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 5117 S. DIXIE HWY.	2a. Mailing Address 26 5117 S. DIXIE HWY.
Suite, Apt. #, etc 22	Suite, Apt. #, etc. 27
City & State 23 FLINT, MI	City & State 28 FLINT, MI 48504
Zip 24 48507 Country 25 US	Zip Country 29 30 U.S.

3. Date Incorporated or Qualified: 07/15/1977

4. FEI Number: 59-2906615 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30 ☒ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
THOMPSON, JACK B 1418 NW 47TH TERR GAINESVILLE FL 32605	81 Name: CT Corporation System 82 Street Address (P.O. Box Number is Not Acceptable): 1200 S. Pine Island Rd. 83 84 City: Plantation FL 85 Zip Code: 33324

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: CT Corporation System Marc Gillis - ASST. V.P. 6-23-98
Signature, typed or printed name of individual with authority to sign (REQUIRED) (Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	☒ DELETE	1.1 TITLE	C ☒ Change ☐ Addition
NAME	LIQUORI, MARTIN W		1.2 NAME	Bond, Alex
STREET ADDRESS	6020 NW 32ND ST		1.3 STREET ADDRESS	2250 Highland Ave. South #6
CITY-ST-ZIP	GAINESVILLE, FL 00000		1.4 CITY-ST-ZIP	Birmingham, AL 35205
TITLE	SDT	☒ DELETE	2.1 TITLE	D ☒ Change ☐ Addition
NAME	SCHACKOW, GERALD		2.2 NAME	Artrip, Hansel
STREET ADDRESS	112 NW 33RD COURT		2.3 STREET ADDRESS	8046 Ranch Estates
CITY-ST-ZIP	GAINESVILLE, FL 00000		2.4 CITY-ST-ZIP	Clarkston, MI 48348
TITLE	VD	☒ DELETE	3.1 TITLE	ST ☐ Change ☐ Addition
NAME	CARNES, JAMES		3.2 NAME	Belsky, Andrew
STREET ADDRESS	1330 NW SIXTH ST.		3.3 STREET ADDRESS	2240 Hidden Lake
CITY-ST-ZIP	GAINESVILLE, FL 00000		3.4 CITY-ST-ZIP	West Bloomfield, MI 48324
TITLE	V	☒ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	THOMPSON, JACK B		4.2 NAME	
STREET ADDRESS	1418 NW 47TH TERR		4.3 STREET ADDRESS	
CITY-ST-ZIP	GAINESVILLE, FL 00000		4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	6/26
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	RECEIPT#
STREET ADDRESS			6.3 STREET ADDRESS	060298 000027 015
CITY-ST-ZIP			6.4 CITY-ST-ZIP	***150.00

CR2E034 (10/97)

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.

SIGNATURE: [signature] 6/8/98 SVP-Secretary