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

CIGNATURE.

PROFIT FLORIDA DEPARTMENT OF STATE FILED CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 98 JUN -5 PM 3: 48 1998 DIVISION OF CORPORATIONS DOCUMENT # 577749 SECRETARY OF STATE TALLAHASSEE. FLORIDA (5) C. W. HARKINS REALTY, INC. Principal Place of Business Mailing Address 3575 W LAKE MARY BLVD. 3575 W LAKE MARY BLVD. SUITE 108 SUITE 108 DO NOT WRITE IN THIS SPACE LAKE MARY FL 32746 LAKE MARY FL 32746 3. Date Incorporated or Qualified 07/05/1978 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 59-1837086 Not Applicable Suite, Apt. #, etc. \$8.75 Additional Suite, Apt #, etc 5. Certificate of Status Desired Fee Required 22 City & State City & State Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 Added to Fees 28 Zip Country Country 8. This corporation owes or has paid the current year Intangible Yes Yes 24 25 Personal Property Tax due June 30. 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Namo HARKINS, C. WILLIAM 3575 W LAKE MARY BLVD., SUITE 108 82 Street Address (P.O. Box Number is Not Acceptable) LAKE MARY FL 32748 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 (NOTE Registered Age of signature required when ro-instating) Signature: typed or ponted name of registered agent and title if applicable 10/97 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELFTE Спапде 1.1 TITLE TITLE HARKINS, C.WILLIAM CR2E034 NAME 1.2 NAME 200002552802--5 -06/09/98--01061--014 ****150.00 ******150.00****** 3575 W LAKE MARY BLVD SUITE 108 STREET ADDRESS 1.3 STREET ADDRESS LAKE MARY FL CITY-ST-ZIP 1.4 CITY - \$1 - ZIP DELETE TITLE 21 TITLE HARKINS, C.WILLIAM 2 2 NAME 3575 W LAKE MARY BLVD SUITE 108 STREET ADDRESS 2.3 STREET ADDRESS LAKE MARY FL CITY-ST-ZIP 2 4 CITY-S1-7IP DELFTE Change Addition THILE 3.1 TITLE HARKINS, SUSAN L. 3.2 NAME 280 NEW GATE LOOP 3.3 STREET ADDRESS STREET ADDRESS HEATHROW FL CITY-ST-ZIP 3.4. CITY - ST - ZIP Change TITLE DELETE 4.1 TITLE Addition 4. 2 NAME STREET ADOSESS 4.3 STREET ADDRESS CITY-ST-4.4 CITY-S1-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 Change DELETE Addition TIFLE 6.1 1ITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 C/TY - ST - Z/P 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 entirely control of suppremental 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 concertain on the receiver of instate entirely execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an advances.