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

CITY-ST-ZIP

STREET ADORESS

SIGNATURE:

CrtY - ST - ZiP

TITLE

NAME

**FILED** Feb 17 1998 8:00am PROFIT LLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # 596475 RIDGCO, INC. Principal Place of Business Mailing Address 171 NE 4TH AVE 171 NE 4TH AVE PO BOX 280 PO BOX 280 DO NOT WRITE IN THIS SPACE DELRAY BCH. FL 33447-0280 **DELRAY BCH. FL 33483-0290** 3. Date Incorporated or Qualified 12/06/1978 2. Principal Place of Business 2a. Mailing Address Applied For 21 59-1873641 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Country Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No Zip Personal Property Tax due June 30. 25 29 30 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name RIDGLEY, ROBERT D 171 NE 4TH AVE Street Address (P.O. Box Number is Not Acceptable) 82 DELRAY BCH., FL 83 33483 84 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. LOBERT D. RIDGLEY 2/10/17 one of treatment and the stamping hen reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. 1.1 TITLE Change Addition TITLE NAME RIDGLEY, SUSAN 1.2 NAME STREET ADDRESS 171 NE 4TH AVE 13 STREET ADDRESS DELRAY BCH., FL 00000 1.4 CITY-ST-ZIP CITY-ST-7IP DELETE Change Addition TITLE 2.1 TITLE RIDGLEY, ROBERT D NAME 2.2 NAME 171 NE 4TH AVE STREET ADDRESS 2 3 STREET ADDRESS DELRAY BCH., FL 00000 2 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition 31 TITLE Change NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 34. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 44 CITY-ST-ZIP Addition DELETE Change 51 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.3 STREET ADDRESS

ROBERT D ROBLEY

6 4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

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 supplienced 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 reserver 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 or anythin anddress.

SIGNATURE:

\*\*ROBERT D. ROBERT D. ROBERT

Addition

DELETE