FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 (3)606700 DOCUMENT # Corporation Name J.R. TILMAN, INC. Principal Place of Business Mailing Address 1040 AURORA ROAD 1040 AURORA ROAD MELBOURNE FL 32935 MELBOURNE FL 32935 3. Date Incorporated or Qualified 3a. Date of Last Report 05/01/1995 01/16/1979 4. FEI Number Applied For 2a. Mailing Address Principal Place of Business 2. 59-1873919 Not Applicable 21 26 \$8.75 Additional Suite, Apt. #, etc. Suite. Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 \$5.00 May Be City & State City & State 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 8. This corporation has liability for intangible tax under s 199.032, Fiorida Statutes X Yes ☐ No Country Zio Ζip 30 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name CRANK, NORMAN JR Street Address (P.O. Box Number is Not Acceptable) 82 5430 PINA VISTA DR. 83 MELBOURNE FL 32935 City 85 Zip Code 84 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. North Regulation Award Sanathre renu ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Change DELETE 1 **16**15LE TITLE CRANK, NORMAN JR ME NAME 5430 PINA VISTA DR REET ADDRESS STREET ADDRESS MELBOURNE FL IY-\$1-20P CITY-ST-ZIF Change Addition DELETE SD 2 ilu E TITLE CRANK, WILMA L 22 AME. NAM: 5430 PINA VISTA DR 2 3 STREET ADDRESS STREET ADDRESS MELBOURNE FL 24 City - ST - 7iP CITY-ST-ZIP Addition ☐ Change DELETE a 1 Dice TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY - ST - 21E CHTY - ST - ZIP Change Addition DELETE 4 1 TIFLE 7 TLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - 7IP CHTY - ST- ZIP ☐ Change Addition DELETE 5 1 HILE TITLE 5.2 NAME NAME 5 3 STREET ADDRESS STREET ADDRESS

61(i) - ST-2iP

14. I do hereby cert fy that the information supplied with this fing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report are supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under cath, that I am an officer or director of fine corporation or the recover or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 12 or Block 12 or on an attachment with an address.

5 4 CITY - ST - ZIP

6.3 STREET ADDRESS

6 1 TITLE

6.2 NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

SIGNATURE AND TYPED OF MILES NAME OF SIGNING OFFICER OR DIRECTOR

DEL E TE

129/96 (407)254-5286

Change

■ Addition

CR2E034 (12/95)