FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 PROFIT FLORIDA DEPARTMENT OF STATE

CORPORATION ANNUAL REPORT

1998

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Feb 02 1998 8:00am Secretary of State

DOCU 1. Corporatio	MENT # 612332 TIC DIE COMPANY, INC.	(7)		
AITILL	TIO DIE GOWERNY, ING.			
Principal Place of Business Mailing Address				
2160-B SADL		2160-B SADLER RD		
FERNANDINA BEACH FL 32034 P.O.BOX 1128 US FERNANDINA BEACH FL 32034			20004	Ph MOT WEITT IN THE COLOR
03		FERNANDINA BEACH FL US	32034	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified
		•••		03/09/1979
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number , Applied For
		26		59-1885365 Applied For Not Applicable
Suite, Apt. #, etc.		Suite Apt. # etc.		SS 75 Additional
22		27 Deleter 10	BOX	5. Certificate of Status Desired Fee Required
City & State		City & State	V - 1	6. Election Campaign Financing \$5.00 May Be
23	312	28		Trust Fund Contribution
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24	25	29	30	Personal Property Tax due June 30. Yes No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent HOLBROOK,H LEON 81 Name				
		פאותבאוד הם	of Name	
2301 INDEPENDENT SQ.,ONE INDEPENDENT DR. JACKSONVILLE FL 8:			82 Street Add	ress (P.O. Box Number is Not Acceptable)
"	DROOMVILLE PL		83	I
			[30]	
]			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 Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) DATE				
12.	OFFICERS AND		13.	red when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PS	DELETE	1.1 TITLE	Change Addition
NAME.	CLOWER, MICHAEL B		1.2 NAME	
STREET ADDRESS	2160 -B SADLER RD		1,3 STREET ADDRESS	
CITY-SI-ZIP	FERNANDINA BCH FL		1.4 CITY - ST-ZIP	
TITLE	T	DELETE	2.1 TITLE	Change Addition
NAME	CLOWER, W.S.		2.2 NAME	
STREET ADDRESS	2160-B SADLER ROAD		2.3 STREET ADDRESS	
CITY-ST-ZIP	FERNANDINA BEACH FL		2. 4 CITY - ST - ZIP	
TITLE		DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP	N. H. C.		3.4. CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	Change Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY - ST - ZiP TITLE		DELETE	4.4 CITY-ST-ZIP	Observe Taxabase
NAME		T DETEIG	5.1 TITLE	Change Addition
			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP TITLE		☐ DELETE	6.4 CITY - ST - ZIP 6.1 TITLE	Change Addition
NAME			6.2 NAME	i change Addition
STREET ADDRESS				
			6.3 STREET ADDRESS	*
14. hereby c	ertily that the information supplied with	this filing does not qualify for	6.4 CITY-ST-ZIP	Section 119.07(3)(i) Florida Statutes I further certify that the information

indicated on this annual report or supplied will this hing does not quality for the exemption stated in section 119.07(3)(1), Florida Statutes. 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.