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

**FILED** Apr 24 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # 652753 (5)COOPER ENTERPRISES, INC. Principal Place of Business Mailing Address P.O. BOX 97-6069 PO BOX 97-6069 1498 SE COVE RD 1498 SE COVE RD DO NOT WRITE IN THIS SPACE STUART FL 34997 STUART FL 34997 3. Date Incorporated or Qualified 01/21/1980 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-1961863 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country 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 81 Name COOPER, GARY 1498 SE COVE RD Street Address (P.O. Box Number is Not Acceptable) 82 STUART FL 34997 В3 84 City Zip Code 11. Pursuant to the provisions of Soctions 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) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition TITLE 11 TITLE COOPER, GARY NAME 1.2 NAME 1498 SE COVE ROAD STREET ADDRESS 1.3 STREET ADDRESS STUART FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition Change TITLE 2111111 COOPER, EARL NAME 2.2 NAME 2882 SW MONARCH TRAIL STREET ADDRESS 2.3 STREET ADDRESS STUART FL CITY-ST-7IP 2 4 City-S1-ZiP DELETE Addition Change TITLE 3.1 TITLE COOPER, JEAN NAME 3.2 NAME 1498 SE COVE RD STREET ADDRESS 3.3 STREET ADDRESS STUART FL CITY - \$1 - ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE 5.1 TITLE Change Addition TITLE NAME 52 NAME

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 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.

6 1 TITLE

6.2 NAME

5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

ean Cooper

DELETE

4-17-88 561-287-7402

Change

Addition

CR2E034 (10/97