FILE NOW: FILING FEE IS \$61.25

NONPROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (6) ALCO-HALL, INC. Principal Place of Business Mailing Address 1215 LAKE DRIVE 1215 LAKE DRIVE 3. Date Incorporated or Qualified COCOA FL 32922 COCOA FL 32922 10/16/1969 4. FEI Number Applied For 23-7061960 Not Applicable 2. Principal Place of Business 2a. Mailing Address \$8.75 Additional 5. Certificate of Status Desired 21 26 Fee Required Suite, Apt. #, etc. \$5.00 May Be Sulte, Apt. #, etc. 6. Election Campaign Financing 22 Trust Fund Contribution Added to Fees City & State City & State 7. Is this nonprofit corporation a homeowners association? Yes XNo 23 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Yes Personal Property Tax due June 30. 24 25 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 MELTON, JONATHAN Street Address (P.O. Box Number is Not Acceptable) **1215 LAKE DR** 83 **COCOA FL 32922** 84 City Zip Code 85 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) (10/97) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change ☐ Addition 1.1 TITLE TITLE COREY, JACK NAME 1.2 NAME **85 CARLETON ST** 1.3 STREET ADDRESS STREET ADDRESS COCOA FL CITY-ST-ZIP 14 CITY-ST-ZIP □ DELETE Change Addition TITLE 2.1 TITLE IVEY, JUDY NAME 2.2 NAME 275 EAGLE LANE STREET ADDRESS 2.3 STREET ADDRESS MERRITT ISLAND FL CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE NAME **ELLIS. STEVE** 3.2 NAME 535 DELANNOY AVE. STREET ADDRESS 3.3 STREET ADDRESS COCOA FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE PATRICK, KENNY NAME 4. 2 NAME 5493 FLINT RD. 4.3 STREET ADDRESS STREET ADDRESS **COCOA FL** CITY-ST-ZIP 4.4 CITY - ST-ZIP DELETE Addition Change TITLE D 5.1 TITLE MELTON, JONTHAN 5.2 NAME NAME STREET ADDRESS 5540 FAN PALM AVE. **5.3 STREET ADDRESS** COCOA FL CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE **Addition** 6.1 TITLE D. John VAN hear 36 Corlton Ave TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS Cocoa CITY-ST-ZIP 64 CITY-ST-ZIP 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 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

5/29/98