APPRUYEU SECOND KOTTCE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AND AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25). FILED FLORIDA DEPARTMENT OF STATE CORPORATION 98 DEC -4 AMID: 17 Sandra B. Mortham ANNUAL REPORT Secretary of State SECRETARY OF STATE TALLAHASSEE, FLORIDA DIVISION OF CORPORATIONS 1998 DOCUMENT # 758389 (1) SUNCOAST SOUND BOOSTERS, INC. Principal Place of Business Mailing Address P.O. BOX 280234 P.O. BOX 280234 3. Date Incorporated or Qualified 0<-18-1981 TAMPA, FL 33682-6734 TAMPA, FL 33682-0234 4. FF! Number Applied For <u>59_-</u> Not Applicable 2a. Mailing Address 2. Principal Place of Business \$8.75 Additional Ø 5. Certificate of Status Desired P.O. BOX 1236 P.O. 26 Fee Required Suite, Apt. #, etc. 6. Election Campaign Financing \$5.00 May Be 22 Trust Fund Contribution Added to Fees 7. Is this nonprofit corporation a homeowners association? FL Countr Country 8. This corporation owes or has paid the current year Intangible USA ☐ Yes Personal Property Tax due June 30. Name and Address of New Registered Agent ROWLAND ROWLAND, SHAWN SHAWN 82 ZOUS BAST BAY DRIVE, # 228 83 LARGO, FC LARGO 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Regida 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 Florina, Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 617.0503, Florida Statutes.

SIGNATURE

HAWN M. RAWI AND TO FACURE

9/22/99 SHAWN M. RWLAND - TREASUREA SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition TITLE 1,1 TITLE ò GENEMER, PAUL 1090S BRITANY LANE, #13 NAME GANSEMER, PAUL 10905 BRITANY LANE, #13 12 NAME 1.3 STREET ADDRESS STREET ADORESS TAMPA, FL 33612 TAMPA, FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DÉLETE ☐ Change ☐ Addition TITLE 21 TITLE 2.2 NAME NAME MORGAN, HARRISONS 464 LAKE BRIDGE LN, #1325 APOPKA FL 32703 STREET ADDRESS 2.3 STREET ADDRESS *****70.00 ******70.00 CITY-ST-ZIP APOPKA FL 2. 4 CITY-ST-ZIP DELETE 3.1 TITLE TITLE ROWLAND, SHAWN ROWLAND, SHAWN 3.2 NAME NAME 2045 EAST BAY DRIVE, #107 LARGO, FL 33771 2045 EAST BAY DRIVE, # 228 LARGO, FL 33771 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change 4.1 TITLE ☐ Addition TITLE MCDERMOTT, EDITH 10304 BRANGLEWOOD PLACE NAME MCDERMOTT, EDITH 4. 2 NAME STREET ADDRESS 10304 BRAMLEWOOD PLACE 4.3 STREET ADDRESS <u> 33624-5003</u> CITY-ST-ZIP TAMPA, FL 4.4 CITY - ST-7IP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5 3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE ☐ Change ☐ Addition 6.1 TITLE TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

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 in the corporation or in the corporation or the corporation of the corporation or the corporation or the corporation of the corporation or the corporation of the corporation or the corporation or the corporation of the corporation or the corporation of the corporation of the corporation of the corporation of the corporation or the corporation of the corporation or the corporation of the corporation o

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