

FILE NOW: FILING FEE IS \$61.25

FILED  
May 21 1998 8:00am  
Secretary of State

<b>NONPROFIT CORPORATION ANNUAL REPORT 1998</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Sandra B. Morham</b> Secretary of State DIVISION OF CORPORATIONS
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<b>DOCUMENT # 760163 (6)</b> 1. Corporation Name <b>MINIMAX, INC.</b>
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Principal Place of Business <b>718 SW 67 TERRACE</b> <b>GAINESVILLE FL 32303</b> <b>US</b>	Mailing Address <b>5601 NW 29 TERRACE</b> <b>GAINESVILLE FL 32653</b> <b>US</b>
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<b>2. Principal Place of Business</b> <b>21</b> Suite, Apt. #, etc. <b>22</b> City & State <b>23</b> Zip <b>24</b> Country	<b>2a. Mailing Address</b> <b>26</b> Suite, Apt. #, etc. <b>27</b> City & State <b>28</b> Zip <b>29</b> Country
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<b>3. Date Incorporated or Qualified</b> <b>09/23/1981</b>	
<b>4. FEI Number</b> <b>59-2237416</b>	Applied For <input type="checkbox"/> Not Applicable
<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
<b>6. Election Campaign Financing</b> <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
<b>7. Is this nonprofit corporation a homeowners association?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

<b>9. Name and Address of Current Registered Agent</b> <b>DELAPARTE, AL</b> <b>8613 SW 1 AVENUE</b> <b>TALLAHASSEE FL 32303</b>
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<b>10. Name and Address of New Registered Agent</b> <b>81 Name</b> <b>Gordon Bennett</b> <b>82 Street Address (P.O. Box Number is Not Acceptable)</b> <b>6793 W Newberry Rd Box 239</b> <b>83</b> <b>84 City</b> <b>Gainesville</b> <b>FL</b> <b>85 Zip Code</b> <b>32601</b>
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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 Gordon Bennett DATE 5/18/98

12. OFFICERS AND DIRECTORS	
TITLE <b>VO</b> NAME <b>STEWART, EDWIN P.</b> STREET ADDRESS <b>4132 HENIARD DR.</b> CITY-ST-ZIP <b>TALLAHASSEE FL</b>	<input type="checkbox"/> DELETE
TITLE <b>PD</b> NAME <b>DELAPARTE, AL</b> STREET ADDRESS <b>8613 S.W. 1ST AVE</b> CITY-ST-ZIP <b>GAINESVILLE FL</b>	<input checked="" type="checkbox"/> DELETE
TITLE <b>TD</b> NAME <b>SCHUMAN, WERNER</b> STREET ADDRESS <b>RT. 3. BOX 56 B</b> CITY-ST-ZIP <b>HAWTHORNE FL 32640</b>	<input type="checkbox"/> DELETE
TITLE <b>SD</b> NAME <b>STEWART, LUCILLE</b> STREET ADDRESS <b>4132 HENIARD DRIVE</b> CITY-ST-ZIP <b>TALLAHASSEE FL 32303</b>	<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>PD</b> <b>Gordon Bennett</b> <b>6793 W Newberry Rd</b> <b>Gainesville FL 32601</b>
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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.

SIGNATURE \_\_\_\_\_

CR2E037 (10/97)