2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE: __

SIGNATURE AND TYPED OR PHINTED NAME OF SIGNING OFFICER OF DIRECTOR

DOCUMENT # 818092 Mar 01, 2007 08:00 AM 1. Entity Namo **Secretary of State** THE FRANK GATES SERVICE COMPANY Principal Place of Business Mailing Address P.O. BOX 182364 COLUMBUS OH 43218-2364 701 INTERNATIONAL PKWY SUITE 175 LAKE MARY FL 32746 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite Apt # etc Suito, Apt. #, etc 1st MOORE CR2E034 (10/06) City & State City & State Applied For 4. FEI Number 31-4359765 Not Applicable Zip Country Country Zip \$8.75 Additional X 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name RINGERS, ANDREW L Street Address (P.O. Box Number is Not Acceptable) **DEAN RINGERS MORGAN & LAWTON** 200 E ROBINSON ST, SUITE 1020 ORLANDO FL 32801 City 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and little r applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. DCEO TILLE mo ☐ Change Addition Delete OVERLY, NILES C NAMI NAMI' 2475 STONEHAVEN COURT NORTH STREET ADDRESS STREET ADDRESS COLUMBUS OH 43220 CHY-ST-7IP CITY-ST-ZIP Addition ☐ Defete Change OVERLY, ROBINSON M. 8777 N GAINEY CENTER DR STREET ADDRESS STREET ADDRESS SCOTTSDALE AZ 85258 CHY-ST-7IP CHY-ST-ZIP 11111 ☐ Change Addition шп Delete NAMi' MCCORMICK, J. LUKE NAMI STREET ADDRESS 5000 BRADENTON AVE STRIFT ADDRESS DUBLIN OH 43017 CHY-ST-7iP CITY-ST-ZiP 1011 ☐ Delete ☐ Change Addition MADIGAN, JOSEPH J NAME NAME 5555 HERON POINT DRIVE #2102 STREET ADDRESS STREET ADDRESS NAPLES FL 34108 City-St-7IP CITY-ST-ZIP TITLE ☐ Delete THE ☐ Change Addition SMITH, GREGORY P NAMI NAME 2303 ABINGTON RD SHALET ADDRESS STREET ADDRESS COLUMBUS OH 43221 CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE, MCC. Addition Delete NAME NAME STREET ADDRESS STRUET ADDRESS CHY-SI-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the examptions contained in Section 119. Florida Statutes, I further certify that the information indicated on this report or supplemental report is title and accurage and that my signature shall have the same legal effect as if made under early; that I am an officer or director of the corporation or the receiver or trustee empowhered to exactle this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other type or powhered.

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