

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

**FILED**  
**Jan 22 1998 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 848453 (7)**

1. Corporation Name  
**MAROUBRA MARYLAND CORPORATION**

Principal Place of Business 2631 NW 41ST ST SUITE C-2 GAINESVILLE FL 32606 US	Mailing Address P.O BOX 950 ARCHER FL 32618 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 1152 Lake Clarke Dr.		2a. Mailing Address 26		3. Date Incorporated or Qualified 03/11/1981	
Suite, Apt. #, etc. 22		Suite, Apt. #, etc. 27		4. FEI Number 52-0793142	
City & State 23 West Palm Beach, FL		City & State 28		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip 24 33406	Country 25 USA	Zip 29	Country 30	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent HUFTY, JOHN A. 1152 LAKE CLARKE DR HWY 41/SR 451 3/4 MI NORTH OF ARCHER (Delete) WEST PALM BEACH FL 33406				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent HUFTY, JOHN A. 1152 LAKE CLARKE DR HWY 41/SR 451 3/4 MI NORTH OF ARCHER (Delete) WEST PALM BEACH FL 33406				10. Name and Address of New Registered Agent	
				81 Name	
				82 Street Address (P.O. Box Number is Not Acceptable)	1152 Lake Clarke Dr.
				83	
				84 City	West Palm Beach, FL
				85 Zip Code	33406

11. Pursuant to the provisions of Sections 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	AST <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HUFTY, JOHN PAGE	1.2 NAME	
STREET ADDRESS	P.O BOX 950 N/A	1.3 STREET ADDRESS	
CITY-ST-ZIP	ARCHER FL	1.4 CITY-ST-ZIP	
TITLE	PTD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HUFTY, JOHN A.	2.2 NAME	
STREET ADDRESS	1152 LAKE CLARKE DR	2.3 STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH FL	2.4 CITY-ST-ZIP	
TITLE	VSD <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HUFTY, DONNA JEAN	3.2 NAME	
STREET ADDRESS	P.O BOX 950 N/A	3.3 STREET ADDRESS	
CITY-ST-ZIP	ARCHER FL	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *John A. Hufty* **John A. Hufty** 1-14-98 352-495-2279

CR2E034 (10/97)