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

FILED PROFIT Apr 27 1998 8:00am ELORIDA DEPARTMENT DE STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # F04013 (1) GUY E. OTTINGER, C.P.A., P.A. Principal Place of Business Mailing Address * GUY E. OTTINGER
720 S. MISSOURI-AVE. 4V16 FOREST HILLS NA 720 S. MISSOURI AVE.
LAKELAND FL 32801-4738
LAKELAND FL 32801-4738 DO NOT WRITE IN THIS SPACE 33P13.1713 3. Date Incorporated or Qualified <u>10/31/1980</u> 2. Principal Place of Business 2a, Mailing Address 4, FEI Number Applied For 59-2056338 26 Not Applicable Suite, Apl. #, etc. Suite Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6, Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees Zip Country Zφ Country 8. This corporation owes or has paid the current year Intangible 24 Yes ☐ No 30 Personal Property Tax due June 30. 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name OTTINGER, GUY E. 720 S. MISSOURI AVE. 4216 FOREST HILLS DR Street Address (P.O. Box Number is Not Acceptable) LAKELAND FL-33801-338/3- (713 83 84 Zip Code 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. 4-Va98 ont and title it applicable (NOTE: Registered Agent signature required when reinstating) DATE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. PST DELETE TITLE 1.1 TITLE ☐ Change Addition NAME Ottinger. Guy e 1.2 NAME 720 S. MISSOURI AVE. STREET ADORESS 1.3 STREET ADDRESS **LA**KELAND FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Addition TITLE Change 2.1 TITLE OTTINGER, GUY E NAME 2.2 NAME 720 S. MISSOURI AVE. STREET ADDRESS 2.3 STREET ADDRESS **LAKELAND** FL CITY-ST-ZIP 2.4 CITY-ST-ZIP TITLE ☐ DELETE Change Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE Change Addition 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE

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.

5.2 NAME

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

5.3 STREET ADDRESS

Change

Addition

5.4 CITY-ST-ZIP

MONATURE, Muy E. Others GUY E OTTINGER 4-Vags

DELETE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP