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

PROFIT Apr 15 1998 8:00am FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT #

1. Corporation Name (8)F89787 WARECO, INC. Principal Place of Business Mailing Address 28050 US HWY 19 N 28050 US HWY 19 N **SUITE 208** SUITE 208 **CLEARWATER FL 34621 CLEARWATER FL 34621** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/01/1982 2, Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For PINCLLAS Suite, Apt. #, etc. 26 59-2213335 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zin Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 ☐ No 30 Personal Property Tax due June 30. ☐ Yes g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SKELTON, ROY C. 28050 US HWY 19 N 82 Street Address (P.O. Box Number is Not Acceptable) **SUITE 208** 83 CLEARWATER FL 34621 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE TITLE 1.1 TITLE Change Addition WARE, RICHARD L. NAME 1.2 NAME 422 DEERHAVEN LN STREET ADDRESS 1.3 STREET ADDRESS HENDERSONVILLE NO Z110 28791 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE Change 2.1 TITLE ■ Addition WARE, CARROLL L. NAME 2.2 NAME **422 DEERHAVEN LN** STREET ADDRESS 2.3 STREET ADDRESS HENDERSONVILLE NC ZIP 28791 CITY-ST-ZIP 2.4 CITY - ST-ZIP DELETE TITLE 3.1 TITLE Addition NUCCI NAME **NUCI. CHRISTINA D** 3.2 NAME STREET ADDRESS **422 DEERHAVEN LN** 3.3 STREET ADDRESS HENDERSONVILLE NC ZIP 28791 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change TITLE 4.1 TITLE ☐ Addition SKELTON, ROY C. NAME 4 2 NAME 28050 US HWY 19 N., SUITE 208 STREET ADDRESS 4.3 STREET ADDRESS **CLEARWATER FL** 218 34621 CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change 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 adactive state of the corporation of the corporation of the corporation or the receiver of 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 adactive state of the corporation of th

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