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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

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May 05 1998 8:00am

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4/27/08 (402)052-0601

Secretary of State
DIVISION OF CORPORATIONS

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Block 12 or Block 13 if changed, or on an attachment with an address

MILLENNIUM III CORPORATION

Principal Place of Business Mailing Address 5115 S. A1A HWY 5115 S. A1A HWY MELBOURNE BEACH FL 32951 MELBOURNE BEACH FL 32951 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/13/1993 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 Not Applicable 52-1439675 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Added to Fees 28 Trust Fund Contribution Country Zip Country Zio 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent BOWMAN, ROBERT M 5115 S. A1A HWY Street Address (P.O. Box Number is Not Acceptable) **MELBOURNE FL 32951** 83 85 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) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE CVS DELETE Change Addition NAME BOWMAN, ROBERT M 1.2 NAME 5115 S. A1A HWY STREET ADORESS 1.3 STREET ADDRESS MELBOURNE BEACH FL 32951 CITY-ST-ZIP 1.4 C(TY-ST-Z)P DELETE TITLE VCPT Change Addition 21 TITLE **BOWMAN, MARGARET E** 2.2 NAME 5115 S. A1A HWY STREET ADDRESS 23 STREET ADDRESS **MELBOURNE BEACH FL 32951** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change TITLE 3.1 TITLE Addition 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP Change DELETE TITLE 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 TITLE 5 1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST- ZIP DELETE TITLE ■ Addition 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST - ZIP

14. Thereby 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