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PROFIT CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F96000001638 (3)

SPINNER & ASSOCIATES INC.

Principal Place of Business 9127 LONGLAKE PALM DRIVE Mailing Address

9127 LONGLAKE PALM DRIVE **BOCA RATON FL 33496**

FILED Apr 15 1998 8:00am Secretary of State



BOCA RATON FL 33496 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/01/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 38-2811907 21 26 Not Applicable \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees 28 Trust Fund Contribution 23 Ζıp Country Country Zip 8. This corporation owes or has paid the current year Intangible ☐ Yes 25 Personal Property Tax due June 30. 29 30 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 SPINNER, M. PETE 9127 LONGLAKE PALM DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) **BOCA RATON FL 33496** 83 City 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 13, ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change TITLE 1.1 TITLE spinner, M. Pete 1.2 NAME CR2E034 NAME 9127 LONGLAKE PALM DRIVE 1.3 STREET ADORESS STREET ADDRESS **BOCA RATON FL 33496** 1.4 CITY-ST-ZIP CITY-ST- ZIP DELETE Addition Change TITLE 2.1 TITLE SPINNER, MARGARET D NAME 2.2 NAME 9127 LONGLAKE PALM DRIVE STREET ADDRESS 2.3 STREET ADDRESS **BOCA RATON FL 33496** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE LING, PAMELA R NAME 3.2 NAME 7329 PEBBLE COURT STREET ADDRESS 3.3 STREET ADDRESS **NIWOT CO 80544** CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-\$T-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 62 NAME STREET ADDRESS 6.9 STREET ADDRESS 6.4 CITY-ST-ZIP 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: M. Rete MIPERE SPINNER) 4/9/97 (561)483-5396