FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS DOCUMENT # (3)Corporation Name GENE A. HODGES CORPORATION Principal Place of Business Mailing Address **ETP-THOTELWOOD-OINCLE** 217 THISTELWOOD GIROLE LONGWOOD FL 92770 3. Date Incorporated or Qualified 3a. Date of Last Report 09/27/1982 03/24/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 21 195 BRIGHTWATER CIR. Applied For 26 795 BRIGHTWATER CIR 59-2227121 Not Applicable Suite, Apt. #, etc. 22 5. Certificate of Status Desired \$8.75 Additional 27 Fee Required City & State 6. Election Campaign Financing MARTI \$5.00 May Be MALTLAND П Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s 199.032 Florida Statutes Yes No 3275 29 Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name HODGES, GENE A 247 THISTLEWOOD CHRELE 795 BRIGHTWATER CIR. Street Address (P.O. Box Number is Not Acceptable) MALTLAND, FL. 32751 Zip Code s of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office of the State of Florida. Such changing was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Lam 11. Pursuant to the provision or registered agent familiar with, and a SIGNATURE 5-22-96 12. (12/95)ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 THE DELETE 1 3 DILE Change Addition NAME HODGES, GENE A DE FEE! ADDRESS CR2E034 795 BAIGHTWATER STREET ADDRESS CITY - \$1 - ZIP NO.FL 32761 14 CITY ST-ZP TITLE 2 : BILE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ACORESS CITY-ST-ZIP 24 CITY - 51-74P TITLE DELETE 3-1-T TEE ☐ Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4 City - \$7 - 7.P TITLE DELETE 4 1 T:TEE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STHEET ADDRESS CITY - S1 - ZIP 4.4 CHY-ST 7.6 DELETE 5 1 1.115 Change ☐ Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 54 CITY - ST - ZiP TITLE DELETE 6 1 Tille Change ☐ Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY - S1 - ZIP 6.4 C'TY - ST - 7IP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicate Logistis annual report or supplicate ital annual report is true and accurate and that my signature shall have the same legal effect as if made undeappears in Block 12 or Block 13 branged, or on any stachment with an aridiess.

SIGNATURE:

5-22-96