FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 May 20 1998 8:00am FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT #

1. Corporation Name (4) JACK KEY, INC. Principal Place of Business Mailing Address 612 VALLE VISTA DR. 115 W. ALEXANDER ST BRANDON FL 33511 PLANT CITY FL 33566 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/09/1983 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For NOT APPLICABLE Not Applicable 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees Trust Fund Contribution 23 Ζιρ Country Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes 24 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name KEY, CLYSIE L., JR. 612 VALLE VISTA DRIVE Street Address (P.O. Box Number is Not Acceptable) BRANDON FL 33511 Zip Code 11. Pursuant to the previsions 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 farmer with, and accept the diphylations of, Section 607.0505, Florida Statutes. SIGNATURE afure required when reinstaling) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OLLICERS AND DIRECTORS 12. 13. DELETE Change Addition 1.1 TITLE TITLE KEY, ADAM C. NAME 1.2 NAME 4141 QUAIL BRIAR DR. 1.3 STREET ADDRESS STREET ADDRESS VALRICO FL CITY-ST-ZIP 1.4 CITY-ST-ZIP Change Addition DELETE 2.1 TITLE TITLE PTD KEY, CLYSIE, L., JR. 2.2 NAME NAME 612 VALLE VISTA DR. 2 3 STREET ADDRESS STREET ADDRESS **BRANDON FL** 2.4 CHY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 3.1 TITLE TITLE NAME KEY, LOUISE C. **3.2 NAME 612 VALLE VISTA DRIVE** STREET ADDRESS 3.3 STREET ADDRESS **BRANDON FL** 3.4. CHY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - \$1 - ZIP CITY-ST-ZIP Change Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP Change ☐ Addition DELETE 6.1 TITLE TITLE 6.2 NAME NAME

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 trusted 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 only in attaching oil with an address.

STREET ADDRESS

CITY-ST-7IP

6.3 STREET ADDRESS

6.4 CITY - ST-ZIP