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

Jan 20 1998 8:00am PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT #

1. Corporation Name G82871 (6)STERLING HALL, INC. Mailing Address Principal Place of Business % DOUGLAS A. HALL % DOUGLAS A. HALL 208 PALMOLA ST 208 PALMOLA ST DO NOT WRITE IN THIS SPACE LAKELAND FL 33803 LAKELAND FL 33803 3. Date Incorporated or Qualified 01/25/1984 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 59-2320353 Not Applicable Suite, Apt. #, etc. Suite, Apl. #, etc. \$8.75 Additional  $\Box$ 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Country Zip Zip 8. This corporation owes or has paid the current year Intangible 24 25 30 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name HALL, DOUGLAS L. 208 PALMOLA ST 62 LAKELAND FL 33803 83 84 Zip Code MELLAMO 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutos, 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, typied or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. ☐ DELETE 1.1 TITLE Change Addition TITLE D٧ HALL, DOUGLAS L. 1.2 NAME NAME OS PALMOLASI 208 PALMOLA ST 1.3 STREET ADDRESS STREET ADDRESS LAKELAND FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 21 TITLE 202 PALMOLAS HALL, SHARON P. STREET ADDRESS 208 PALMOLA ST 2.3 STREET ADDRESS DKELAND PL LAKELAND FL 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 3.1 TITLE Change Addition TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3 4. CITY-S1-ZIP CITY-ST-ZIP DELFTE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - S1 - ZIP CITY - ST - ZIP DELETE ☐ Change Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 64 CITY - ST - ZIP 14. I hereby certify that the information supplied with this filing does not qualify indicated on this annual report to supplemental annual report is true rip a officer or director of the conforation or the receiver if trustee empty and Block 12 or Block 13 if chansed, or of this true thing it with an a legislation. he exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information

ate and that my signature shall have the same legal effect as if made under oath, that I am an ocule this report as required by Chapter 607, Florida Statutes; and that my name appears in

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**FILED**