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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

H05887

(5)

FIRST AMERICAN BANK OF INDIAN RIVER COUNTY

FILED Jan 16 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 4000 20TH STREET 4000 20TH STREET VERO BEACH FL 32960-2414 VERO BEACH FL 32960-2414 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/30/1984 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-2429748 Not Applicable Suite, Apt #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible ☐ Yes □ No 24 30 Personal Property Tax due June 30. 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) 83 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1503, 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: Rogistered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change 1.1 TITLE TITLE MCCALL, RONALD NAME 1.2 NAME **7150 20TH STREET** STREET ADDRESS 1.3 STREET ADDRESS VERO BEACH FL CITY - ST - ZIF 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE WILLIAMS, ANDREW NAME 2.2 NAME 616 AZALEA LANE STREET ADDRESS 2.3 STREET ADDRESS VERO BEACH FL CITY - ST - ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition 3.1 TITLE NAME SEXTON, CHARLES R. S. 3 2 NAME STREET ADDRESS P.O. BOX 1208 N/A 3.3 STREET ADDRESS VERO BEACH FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE NAME SHACKLEY, STEVEN C. 4. 2 NAME 8635 26TH STREET 4.3 STREET ADDRESS STREET ADDRESS VERO BEACH FL 4.4 CITY - ST - ZIP City-ST-ZIP DELETE Change Addition TITLE 51 TITLE MCWILLIAM, ROBERT NAME 5.2 NAME 440 - 45TH CT STREET ADDRESS 5.3 STREET ADDRESS VERO BEACH FL 5.4 CITY-ST-ZIP CITY-ST-ZIP DELFTF 6.1 TITLE Change Addition TITLE SMITH, DAVID BARRY, JR. 6.2 NAME STREET ADDRESS 1635 51ST CT 6.3 STREET ADDRESS

14. I hereby certify that the information supplied with this filling 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—on an attachment with an address.

6.4 CITY - ST-ZIP

SIGNATURE:

CITY-ST-ZIP

VERO BEACH FL

CSTEVEN C SHACKLEY

(10/97 CR2E034