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

FILED PROFIT Feb 12 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (6)MILLBROOK PROPERTIES, INC. Principal Place of Business Mailing Address % ALLEN L. MILLS 1211 ILLINOIS STREET * ALLEN L. MILLS 1211 ILLINOIS STREET DO NOT WRITE IN THIS SPACE ORLANDO FL 32803 ORLANDO FL 32803 3. Date Incorporated or Qualified 07/23/1984 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable 59-2641256 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Ζıρ Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes □ No 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MILLS, ALLEN L. 1211 ILLINOIS ST. Street Address (P.O. Box Number is Not Acceptable) 82 ORLANDO FL 32803 83 84 City Zip Code 85 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 (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. TITLE DELETE 1.1 TITLE Change Addition MILLS, BEVERLY NAME 1.2 NAME 1211 ILLINOIS ST. STREET ADDRESS 1.3 STREET ADDRESS ORLANDO FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELFTE 2.1 TITLE Change Addition TITLE NAME MILLS, ALLEN L. 2.2 NAME STREET ADDRESS 1211 ILLINOIS ST. 2.3 STREET ADDRESS ORLANDO FL 2.4 CITY-ST-ZIP CITY-ST-7IP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY+ST-ZIP DELETE Change Addition TITLE 41 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 51 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST- ZIP

14. Thereby 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 Devon C. Mills / Bened C Mills 2/4/98

61 TITLE 6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

Change

Addition

DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-7/P