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FILED

Apr 08 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # H22832 (0)

1. Corporation Name  
NATIONAL PARTNERSHIP EXCHANGE, INC.

Principal Place of Business

100 W.KENNEDY BLVD.,#280  
P.O.BOX 578  
TAMPA FL 33601

Mailing Address

100 W.KENNEDY BLVD.,#280  
P.O.BOX 578  
TAMPA FL 33601

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/26/1984

4. FEI Number

59-2450187

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 1715 N. Westshore Blvd.

Suite, Apt. #, etc.

22 #700

City & State

23 TAMPA FL

Zip

24 33607

Country

25 USA

2a. Mailing Address

26 1715 N. Westshore Blvd

Suite, Apt. #, etc.

27 #700

City & State

28 TAMPA FL

Zip

29 33607

Country

30 USA

9. Name and Address of Current Registered Agent

HAMILTON, GEORGE E.  
100 W.KENNEDY BLVD.,#280  
TAMPA FL 33601

10. Name and Address of New Registered Agent

81 Name

Robert Savage

82 Street Address (P.O. Box Number is Not Acceptable)

1715 N. Westshore Blvd

83

#700

84 City

TAMPA

FL

85 Zip Code

33607

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

Robert Savage

(NOTE: Registered Agent signature required when reinstating)

DATE

3/18/98

12. OFFICERS AND DIRECTORS

TITLE CPD ☒ DELETE

NAME HAMILTON, GEORGE E.  
STREET ADDRESS 525 LAMARA WAY N.E.  
CITY - ST - ZIP ST. PETERSBURG FL

TITLE VSD ☒ DELETE

NAME HARKINS, JEFFERSON  
STREET ADDRESS 131 W.DAVIS BLVD.  
CITY - ST - ZIP TAMPA FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Director ☐ Change ☒ Addition

1.2 NAME Brady Fay  
1.3 STREET ADDRESS 4432 Cypress Trace  
1.4 CITY - ST - ZIP TAMPA FL 33629

2.1 TITLE Director ☐ Change ☒ Addition

2.2 NAME Robert Savage  
2.3 STREET ADDRESS 2602 Tyson Ave  
2.4 CITY - ST - ZIP TAMPA FL 33607

3.1 TITLE Director ☐ Change ☒ Addition

3.2 NAME Richard Fruch  
3.3 STREET ADDRESS 409 Beach Park  
3.4 CITY - ST - ZIP TAMPA FL 33607

4.1 TITLE President ☐ Change ☒ Addition

4.2 NAME Donald J Gunn Jr  
4.3 STREET ADDRESS 6740 MacLaurin Ct  
4.4 CITY - ST - ZIP TAMPA FL 33629

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

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 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:

Robert K Savage

3/18/98

CR2E034 (10/97)