FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **FILED** FLORIDA DEPARTMENT OF STATE Jan 28 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (9)RICHARD AND DARIN SMITH, INC. Principal Place of Business Mailing Address % KENNETH N. JACOBY, P.A. % KENNETH N. JACOBY, P.A. 1275 S PATRICK DR. STE C 1275 S PATRICK DR. STE C DO NOT WRITE IN THIS SPACE SATELLITE BEACH FL 32937 SATELLITE BEACH FL 32937 3. Date Incorporated or Qualified 10/08/1984 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable 26 59-2458996 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees Trust Fund Contribution 23 28 Zip Country Country 8. This corporation owes or has paid the current year Intangible ΠNo ☐ Yes 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 JACOBY, KENNETH N. 1423 S. PATRICK DR. Street Address (P.O. Box Number is Not Acceptable) 82 SATELLITE BEACH FL 32937 83 Zip Code 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 Signature, typed or printed name of registered agent and title if applicable ed when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. \_\_ Change Addition DELETE 1.1 TITLE TITLE DP 1.2 NAME SMITH, RICHARD E. NAME 1275 S PATRICK DR. STE C 1.3 STREET ADDRESS STREET ADDRESS SATELLITE BEACH FL 1.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 2.1 TITLE TITLE DVS SMITH, MARTHA C. 2.2 NAME NAME 1275 S PATRICK DR. STE C 2.3 STREET ADDRESS STREET ADORESS SATELLITE BEACH FL 2, 4 CITY - ST - ZIP CITY-ST-ZIP Addition DELETE TITLE 3.1 TITLE 32 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Addition Change DELETE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS

CHY-ST-ZIP
1. 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.

4.4 CITY - ST - ZIP

5.4 CITY - ST-ZIP

6.3 STREET ADDRESS

5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS

6.1 TITLE

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DELETE

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CITY - ST - ZIP

TITLE

NAME

1-21-98 407-773-8647

Change

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Addition

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(10/97)