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

Apr 23 1998 8:00am **PROFIT** ELORIDA DEPARTMENT DE STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # H41699 (0)CENTRAL FLORIDA PROPERTIES, INC. Principal Place of Business Mailing Address % DANIEL M. HUNTER S DANIEL M. HUNTER 243 WEST PARK AVENUE 243 WEST PARK AVENUE WINTER PARK FL 32789 WINTER PARK FL 32789 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/07/1985 2. Principal Place of Business Mailing Address 4. FEI Number Applied For Not Applicable 26 59-1677162 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 Country 8. This corporation owes or has paid the current year Intangible 24 25 29 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name HUNTER, DANIEL M. 243 WEST PARK AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) WINTER PARK FL 32789 83 City Zip Code 85 .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 familier with, and accept the obligations of, Soction 607.0505, Florida Statutes. SIGNATURE AND DIRECTORS 12 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 \_\_\_ Change TITLE DELFTE \_\_\_ Addition HUNTER, DANIEL M. NAME 12 NAME CR2E034 #9 ISLE OF SICILY STREET ADDRESS 1.3 STREET ADDRESS WINTER PARK FL CHY-ST ZIP 14 CITY - ST - ZIP DELETE Change Addition TITLE 21 TITLE NAME 22 NAME STREET ADDRESS 2 3 STREET ADDRESS 2 4 CHY-ST-ZIP CITY - ST - ZIF DELFTE 31 TITLE TITLE ☐ Change ☐ Addition 3 2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3 4. C(TY - ST - 7)P DELFIE Change Addition TITLE 4 I TITLE NAME 4 2 NAME 4 3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-7IP DELETE Change Addition TITLE 5.1 THLE NAME 5 2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-\$1-ZIP 5 4 CITY - ST - ZIP DELETE Change \_\_\_ Addition TITLE 6.1 HILE

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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

GNATURE:

A 4/4/18

4/5/18

14. Thereby certify that the information supplied with this filing closs not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information

6.2 NAME

63 STREET ADDRESS

NAME

STREET ADDRESS