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

FILED FLORIDA DEPARTMENT OF STATE Jan 23 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # H59588 (4)DEVELOPERS CHOICE, INC. Principal Place of Business Mailing Address 8150 PRESIDENTS DR. 8150 PRESIDENTS DR. ORLANDO FL 32809 ORLANDO FL 32809 DO NOT WRITE IN THIS SPACE LIS 3. Date incorporated or Qualified 05/31/1985 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-2549130 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Country Zio 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 EATON, STEPHEN A. 8150 PRESIDENTS DR 82 Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32809 83 Zip Code 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 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, and accept the obligations of, Section 607.0505, Florida Statutes. 11. Pursuan' 1.9.98 SIGNATURE of registered agent and title if applicable (NOTE. Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE 1.1 TITLE ☐ Change TITLE EATON, STEPHEN A. 1.2 NAME NAME CR2E034 1749 LEE JANZEN DRIVE 1.3 STREET ADDRESS SYREET ADDRESS KISSIMMEE FL 34744 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Addition TITLE STD 2.1 TITLE Change EATON, PAMELA A. NAME 2.2 NAME 1749 LEE JANZEN DRIVE STREET ADDRESS 2.3 STREET ADDRESS KISSIMMEE FL 34744 CITY-ST-ZIP 2. 4 CITY - ST-ZIP TITLE DELETE Change ___ Addition 3.1 TITLE NAME THEODORE, DANE G 10710 JUPITER NARROWS STREET ADDRESS 3.3 STREET ADDRESS HOBE SOUND FL 33455 3.4. CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE TITLE 5.1 TITLE Change Addition 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE

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 diviporation 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 chapter 607 or on an attachment with an address.

6.2 NAME 6.3 STREET ADDRESS

SIGNATURE:

NAME

STREET ADDRESS CITY-ST-ZIF

stephen eaton

1.9.98

407-855-9108