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

May 15 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE *CÖRPÖRATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS **DOCUMENT #** H70788 PAUL W. DAVIS INTERNATIONAL CORPORATION Principal Place of Business Mailing Address AND CASES CREEN DRIVE 0000 OYPREGO GREEN DRIVE JAOKSONVILLE FL 02250- JACKSONVILLE FL 02250 DO NOT WRITE IN THIS SPACE MONUMENT ROAD same as 3. Date Incorporated or Qualified ACKSONVIlle, F1 32225 08/09/1985 2a. Mailing Address 4. FEI Number Applied For 21 59-2568862 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 30 Personal Property Tax due June 30. Yes □ No 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 DAVIS, PAUL W 301 MEADOWFIELD BLUFF ROAD 82 Street Address (P.O. Box Number is Not Acceptable) YULEE FL 32097 83 84 City 65 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 Signature, typed or printed name of registered agent and little if applicable (NOTE: Registered Agont signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIBECTORS IN 12 13. CD DELETE Change Addition TITLE 1.1 TITLE DAVIS, PAUL W MALIF 1.2 NAME 1301-7 MONUMENT ROAD **0000 CYPRESS GREEN DRIVE** STREET ADDRESS 1.3 STREET ADDRESS JACKSONVILLE, FL 32225 JACKSONVILLE FL 92256 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE DAVIS, BRENDA NAME **2.2 NAME** 1301-7 MONUMENT ROAD **9000 CYPRESS GREEN DRIVE** STREET ADDRESS 2.3 STREET ADDRESS JACKSONVILLE FL 32256 --TACKSONVIlle, CITY-ST-ZIP 2. 4 CITY - ST-ZIP ___ DELETE Addition 3.1 TITLE ROBINSON, TIMOTHY NAME 3.2 NAME 9000 CYPRESS GREEN DRIVE STREET ADDRESS 3.3 STREET ADDRESS JACKSONVILLE FL 32256 CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE 4.1 THILE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE 5.1 TITLE ☐ Change Addition TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** 6.4 CITY-SY-ZIP 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 of Supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation of 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.

FILED