FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 Apr 27 1998 8:00am **PROFIT** ELORIDA DEPARTMENT DE STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # J40628 (6)BRIDGE STRUCTURES, INC. Principal Place of Business Mailing Address **BRAD BOULTON G/O BRAD BOULTON** 1705 COLONIAL BLVD. UNIT C-4 1705 COLONIAL BLVD. UNIT C-4 FORT MYERS FL 33907-7296 DO NOT WRITE IN THIS SPACE FORT MYERS FL 33907-7296 3. Date Incorporated or Qualified 11/03/1986 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-2740065 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 Zip Country This corporation owes or has paid the current year Intangible 25 Personal Property Tax due June 30. ☐ Yes 24 30 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 **BOULTON, BRAD** 1705 COLONIAL BLVD, UNIT C-4 **B2** Street Address (P.O. Box Number is Not Acceptable) FT. MYERS FL 33907 83 84 City 85 Zip Code FL 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 (NOT: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Addition DELETE 1 1 TITLE Change TITLE **BOULTON, JIM** NAME 1.2 NAME **150 TURNBERRY CIRCLE STREET ADDRESS** 1.3 STREET ADDRESS **NEW SMYRNA BEACH FL** CITY-ST-ZIP 1.4 City-St-ZIP DELETE Change Addition TITLE 2.1 TITLE **BOULTON, J. BRADFORD** 2.2 NAME 4104 HIDDEN ACRES CIRCLE STREET ADDRESS 2.3 STREET ADDRESS N. FT. MYERS FL 2 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE MINICH, MARK NAME 3.2 NAME **1928 SE 31ST TERR** STREET ADDRESS 3.3 STREET ADDRESS CAPE CORAL FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP

6.4 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 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 any address.

5.1 TITLE 5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

DELETE

DELETE

Block 12 of Block 15 if Charles and an Anadomical with an Address.

TITLE

NAME STREET ADDRESS

TITLE

NAME

CITY-ST-ZIP

STREET ADDRESS

1/2/1/94

☐ Change

Change

___ Addition

☐ Addition