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

Feb 26 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # J45552 (3)SURRENCY PROPERTIES, INC. Principal Place of Business Mailing Address 7427 MERRILL RD 7427 MERRILL RD JACKSONVILLE FL 32211 JACKSONVILLE FL 32211 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/05/1986 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-2752370 21 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Country Country 8. This corporation owes or has paid the current year Intangible X Yes 24 29 30 Personal Property Tax due June 30. ∏ No 25 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B1** Name SURRENCY, CLIFTON M., JR 12013 ARBOR LAKE DR 82 Street Address (P.O. Box Number is Not Acceptable) JACKSONVILLE FL 32225 83 84 City Zip Code 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 Agent signature required when reinstating) 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS DELETE Change TITLE 1.1 TITLE Addition SURRENCY, CLIFTON M., JR 1.2 NAME 12013 ARBOR LAKE DR STREET ADDRESS 1.3 STREET ADDRESS JACKSONVILLE FL CITY-ST-ZIP 1.4 CITY-ST-ZIP Addition DELETE TITLE 2.1 TITLE Change MALIF 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP □ DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADORESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 51 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 61 TITLE NAME 6.2 NAME

FILED

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 recoiver 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.

SIGNATURE:

SIGNATURE:

Provided True of 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 in Section 119.07(3)(i), Florida Statutes. I further certify that the Information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the Information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the Information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the Information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the Information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the Information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the Information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the Information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the Information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the Information indicated in Section 119.07(3)(ii), Florida Statutes. I further certificated in Section 119.07(3)(ii), Fl

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

STREET ADDRESS

City-St-ZIP