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

STREET ADDRESS

CITY-ST-ZIP

Feb 10 1998 8:00am **PROFIT** EL ORIDA DEPARTMENT DE STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # J46813 (8) JBH OF LONGWOOD, INC. Mailing Address Principal Place of Business 390 N. ORANGE AVENUE 390 N. ORANGE AVENUE **SUITE 2500** SUITE 2500 DO NOT WRITE IN THIS SPACE ORLANDO FL 32801 ORLANDO FL 32801 3. Date Incorporated or Qualified 12/08/1986 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For Not Applicable 59-2743318 21 Suite, Apt #. etc. Suite, Apt. #, etc. \$8.75 Additional 5, Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Country Zιρ Zip This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 24 25 29 10. Name and Address of New Registered Agent Name and Address of Current Registered Agent Name SALLEY, STEPHEN G ESQ. 390 N. ORANGE AVENUE Street Address (P.O. Box Number is Not Acceptable) **SUITE 2500** ORLANDO FL 32801 City 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. Fam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE 11 TITLE BRYAN, JAMES B., W 1.2 NAME NAME 254 DRIGGS DRIVE 1.3 STREET ADDRESS STREET ADDRESS WINTER PARK FL 1.4 CITY-ST-ZIP CITY - ST - ZIP DELETE X Change Addition TITLE 2.1 TITLE MASON, BETTY MASON, BETTY 2.2 NAME 254 DRIGGS DRIVE 2.3 STREET ADDRESS STREET ADDRESS 254 DRIGGS DRIVE WINTER PARK FL 2. 4 CITY - ST- ZIP CITY - ST - ZIP WINTER PARK, FL Addition DELETE TITLE 3.1 TITLE SCMIDT, CHERYL SCHMIDT, CHERYL NAME 3.2 NAME 254 DRIGGS DRIVE 3.3 STREET ADDRESS STREET ADDRESS 254 DRIGGS DRIVE 32793 Change WINTER PARK FL 3.4 CITY-\$1-ZIP CITY-ST-ZIP WILTER PARK, FL DELETE Addition 4.1 TITLE TITLE BRYAN, JAMES B IV 4. 2 NAME NAME BRYAN, JAMES B. IV 254 DRIGGS DR. STREET ADDRESS 4.3 STREET ADDRESS 254 DRIGGS DRIVE WINTER PARK FL CITY-ST-ZIP 4 4 CITY-ST-ZIP WINTER PARK, FL 32793 Change DELETE 5 1 TITLE Addition TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5 4 CITY - ST - ZIP DELETE ☐ Change Addition 61 TITLE TITLE 62 NAME NAME

6.3 STREET ADDRESS

6.4 City - ST - 7iP

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 coeriver 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 only attachment with an address

FILED