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FILED PROFIT FLORIDA DEPARTMENT OF STATE Jan 29 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # J50583 (0)BUTLER PROPERTIES, INC. Principal Place of Business Mailing Address 805 E. HILLSBORO BLVD 805 E. HILLSBORO BLVD DEERFIELD BEACH FL 33441 DEERFIELD BEACH FL 33441 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/23/1986 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 59-2748057 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution П Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 25 24 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 BUTLER, JACK E. 2363 LOBLOLLY LANE 150 S.E. 4th Ave. Street Address (P.O. Box Number is Not Acceptable) DEERFIELD BEACH FL 33441 83 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 title if applicable (NOTE. Registered Agent signature required when reinstaling ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE TITLE 1.1 TITLE Change Addition NAME BUTLER, JACK E. 12 NAME 150 S.E. 4th Ave 2363 LOBLOLLY LN. STREET ADDRESS 1.3 STREET ADDRESS DEERFIELD BEACH FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE ___ Addition TITLE Change STD 2.1 TITLE BUTLER, ROBERT D. NAME 2.2 NAME STREET ADDRESS 84 S.E. 4TH AVE. 2.3 STREET ADDRESS DEERFIELD BEACH FI CITY-ST-ZIP 2. 4 CITY-ST-ZiP DELETE TITLE Change Addition 3.1 TITLE NAME BUTLER, MOLLY W. 3.2 NAME STREET ADDRESS 2363 LOBLOLLY LN. 3.3 STREET ADDRESS DEERFIELD BEACH FI CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE **DELETE** Change ___ Addition 4.1 TITLE NAME BUTLER, MARTHA P. 4.2 NAME STREET ADDRESS 84 S.E. 4TH AVE. 4.3 STREET ADDRESS DEERFIELD BEACH FL CITY - ST - ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition NAME BEACH, KAREN 5.2 NAME STREET ADDRESS 77 EAST CUGRINO REAL 5.3 STREET ADDRESS **BOCA RATON FL** CITY-ST-ZIP 5.4 CITY - ST- ZIP DELETE TITLE 6.1 TITLE Change Addition

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 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 an address.

6.2 NAME

6.3 STREET ADDRESS 6.4 CITY - ST - ZIP

Lack GITTH SIGNATURE:

NAME

STREET ADDRESS