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

SIGNATURE:

FLORIDA DEPARTMENT OF STATE Jan 20 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # J50944 (4) BEVERLY'S GERHNN OF SARASOTA, INC. Principal Place of Business Mailing Address 4950 TUCUMCARI TRAIL 4950 TUCUMCARI TRAIL SARASOTA FL 34241 SARASOTA FL 34241 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/29/1986 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 21 26 59-2765319 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional X 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 25 24 Yes 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name GARCIA, BEVERLY FOX 74-210 TUCUMCARI TRAIL 82 Street Address (P.O. Box Number is Not Acceptable) SARASOTA FL 34241 83 84 City 85 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 appli egistered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DP TITLE . DELETE Change 1.1 TITLE Addition NAME GARCIA, BEVERLY FOX 1.2 NAME **CR2E034** 74-210 TUCUMCARI TRAIL STREET ADDRESS 1.3 STREET ADDRESS SARASOTA FL CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE DELETE 2.1 TITLE ☐ Addition GARCIA, ANDREW A. NAME 2.2 NAME 74-210 TUCUMCARI TRAIL STREET ADDRESS 2.3 STREET ADDRESS SARASOTA FL CiTY - ST - ZIP 2. 4 CITY-ST-ZIP DELETE TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIF 3.4. CITY - ST - ZIP TITLE DELETE 4.1 TITLE Change ___ Addition NAME 4, 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP ☐ DELETE TITLE 6.1 TITLE Addition | Change NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 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 of the receiver or trustife 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 an an attachment with an address.

FILED