FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 Apr 17 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # J69051 GICOLL, INC. Principal Place of Business Mailing Address 5012 STERLING MANOR DRIVE 5012 STERLING MANOR DRIVE TAMPA FL 33647 TAMPA FL 33647 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/23/1987 2. Principal Place of Business 4. FEI Number 14703 59-2831196 21 Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees Country This corporation owes or has paid the current year Intangible USA 25 USA Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agen 10. Name and Address of New Registered Agent Board, Gina 5012 STERLING MANOR DRIVE 82 TAMPA FL 33647 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 an familiar with, and accept the obligations of, Section 697.0505, Florida Statutes. SIGNATURE (NCITE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change TITLE 1.1 TOUR **BOARD.** GINA K. NAME 1.2 NAME 5012 STERLING MANOR DRIVE STREET ADDRESS 1.3 STREET ADDRESS TAMPA FL 33647 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change TITLE 2.1 TITLE BOARD, COLLETTE D. NAME 2.2 NAME **5012 STERLING MANOR DRIVE** STREET ADDRESS 2.3 STREET ADDRESS TAMPA FL 33647 CITY-ST-ZIP 2. 4 CITY-S1-ZIP Change DELETE TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3 4. C(TY-ST-Z)P DELETE ☐ Change 4.1 TOLE

CITY-ST-ZIP 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 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 chapted, or on an attachment with an address.

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Applied For

Not Applicable

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