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

CICNATUDE.

May 04 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 # (2)PAGE & MCKEAN, INC. Principal Place of Business Mailing Address **601 PAGE STREET** PO BOX 899 **AUBURNDALE FL 33823** WINTER HAVEN FL 33881 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/18/1987 2. Principal Place of Business 2a, Mailing Address Applied For 59-2814094 26 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 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 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Zip Country Country 24 30 25 29 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 Name CHILTON, CHARLES R. 99 SIXTH ST SW 82 Street Address (P.O. Box Number is Not Acceptable) WINTER HAVEN FL 33883 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, typnd or printed name of registered agent and tille if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS CR2E034 (10/9) 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.3 TITLE Change NAME LAWHUN, DELBERT J. 1.2 NAME **601 PAGE STREET** STREET ADDRESS 1.3 STREET ADDRESS AUBURNDALE FL CITY-ST-ZIP 1.4 CITY - ST - ZIP D۷ DELETE D Change Addition TITLE 2.1 TITLE NAME JON LAWHON 22 NAME STREET ADDRESS **6**01 PAGE STREET 2.3 STREET ADDRESS CITY-ST-ZIP **AUBURNDALE FL** 2. 4 CITY - ST - ZIP TITLE ☐ DELETE 3.1 TITLE Change Addition JAMES HESTON NAME 3.2 NAME **601 PAGE STREET** STREET ADDRESS 3.3 STREET ADDRESS **AUBURNDALE FL** CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE X Addition TITLE 4.1 TOTLE Change Bryan N. Saterbi NAME 4. 2 NAME 302 Progress Rd STREET ADDRESS 4.3 STREET ADDRESS Accourada CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE ★ Addition TITLE 5.1 TITLE 5.2 NAME Stephen C. Saterbo STREET ADDRESS 5.3 STREET ADDRESS 302 Progress Road CITY-ST-ZIP 5.4 CITY - ST - ZIP Auburn dale TITO F DELETE 6 1 TITLE Change Addition M. Saterbo Progress saterbo John NAME 62 NAME 302 STREET ADDRESS 6.3 STREET ADDRESS 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 signiture 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

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941-967-0636