FILE NOW: FILING FEE AFTER MAY 1 IS $550.00

AMENDED

PROFIT CORPORATION ANNUAL REPORT **1997**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 05 1997 8:00 am
Secretary of State

DOCUMENT # J74549

1. Corporation Name
SEMORAN INVESTMENTS, INC.

Principal Place of Business | Mailing Address

258 E. Altamonte Drive
Altamonte Springs, FL 32701
(mailing address is same)

2. Principal Place of Business 21 Altamonte Springs, FL	2a. Mailing Address 26 (same as above)
Suite, Apt. #, etc. 22 258 E. Altamonte Dr.	Suite, Apt. #, etc. 27
City & State 23 Altamonte Springs, FL	City & State 28
Zip 24 32701 / Country 25 USA	Zip 29 / Country 30

3. Date Incorporated or Qualified: 05/27/87
3a. Date of Last Report:
4. FEI Number: 59-2825497 — Applied For / Not Applicable
5. Certificate of Status Desired ☐ — Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

STEVEN R. BREWER
258 E. ALTAMONTE DR.
ALTAMONTE SPRINGS, FL 32701
Per Caroline at UCC filings

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City — 85 Zip Code

200002079152--9
-02/05/97--01097--029
*****61.25 *****61.25
FL

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 reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
TITLE	D President — [x] DELETE	1.1 TITLE	President — [x] Change ☐ Addition
NAME	WESLEY EARL BREWER	1.2 NAME	Seth Miller
STREET ADDRESS	324 Ashforth Ave.	1.3 STREET ADDRESS	4822 Albemarle Rd., Ste. 101
CITY-ST-ZIP	Heathrow, FL 32746	1.4 CITY-ST-ZIP	Charlotte NC
TITLE	☐ DELETE	2.1 TITLE	V. President — ☐ Change [x] Addition
NAME		2.2 NAME	Steven R. Brewer
STREET ADDRESS		2.3 STREET ADDRESS	258 E. Altamonte Drive
CITY-ST-ZIP		2.4 CITY-ST-ZIP	Altamonte Springs, FL 32701
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		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	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

CR2E034 (9/96)

2-5-97

14. I do 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.

SIGNATURE ____________ STEVEN R. BREWER 02/04/97