FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

FILED
95 FEB 16 AM 11:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # J74822 (4)

1. Corporation Name
KEITH VALENTINE, INC.

Principal Place of Business	Mailing Address
~~1805 WILLIAMS RD.~~ ~~PLANT CITY FL 33565~~	~~1805 WILLIAMS RD.~~ ~~PLANT CITY FL 33565~~

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 05/26/1987	3a. Date of Last Report: 08/11/1994
4. FEI Number: 59-2886222	Applied For / Not Applicable
5. Certificate of Status Desired	$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21 3308 W. Trappnel Rd	26 PO Box 489
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: Plant City FLA.	28 City & State: Plant City Florida
24 Zip: 33567 25 Country: Hillsborough	29 Zip: 33564 30 Country: Hillsborough

9. Name and Address of Current Registered Agent

VALENTINE, R. KEITH
~~1805 WILLIAMS RD.~~
~~PLANT CITY FL 33565~~

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable): 2910 Forest Club dr.
83
84 City: Plant City FL 85 Zip Code: 33567

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: R. Keith Valentine R. Keith Valentine 2-10-95
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 IN 12	
TITLE	PD	1.1 TITLE	☒ Change ☐ Addition
NAME	VALENTINE, R. KEITH	1.2 NAME	Valentine, R. Keith
STREET ADDRESS	~~1805 WILLIAMS RD~~	1.3 STREET ADDRESS	2910 Forest Club dr.
CITY-ST-ZIP	~~PLANT CITY FL~~	1.4 CITY-ST-ZIP	Plant City, Florida 33567
TITLE	ST	2.1 TITLE	☒ Change ☐ Addition
NAME	VALENTINE, RACHEL F.	2.2 NAME	Valentine, Rachel F
STREET ADDRESS	~~1805 WILLIAMS RD~~	2.3 STREET ADDRESS	2910 Forest Club dr.
CITY-ST-ZIP	~~PLANT CITY FL~~	2.4 CITY-ST-ZIP	Plant City, FLA 33567
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	900001419919
CITY-ST-ZIP		3.4 CITY-ST-ZIP	-03/02/95--01116--001
TITLE		4.1 TITLE	****200.00 ☒ Change 200.00 ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

PD Rhonda 2/1/95

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: R Keith Valentine R. Keith Valentine 2-10-95 8137542550
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0287802 CP