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FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$ Jan 30 1998 8:00am F STATE FLORIDA DEPARTMEN **PROFIT** Sandra B. Mor CORPORATION Secretary of State ANNUAL REPORT Secretary of St DIVISION OF CORPO TIONS 1998 DOCUMENT #

1. Corporation Name (6)BOATNER, INC. Mailing Address Principal Place of Business 10300 PENSACOLA BLVD 2341 GLAMIS DR PENSACOLA FL 32534 PENSACOLA FL \$2500 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/24/1987 2a. Mailing Address 4. FEI Number Applied For 2. Principal Place of Business NOT APPLICABLE Not Applicable 26 21 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State 6. Election Campaign Financing \$5.00 May Be City & State Trust Fund Contribution Added to Fees 28 23 C 8. This corporation owes or has paid the current year Intangible Zip Country Zip 30 Personal Properly Tax due June 30. 29 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name LONBOM, PAUL W. 325 JOHN KNOX ROAD Street Address (P.O. Box Number is Not Acceptable) SUITE F-205 TALLAHASSEE FL 32303 Zip Code Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the
office or registered agent, or both, in the State of Florida. Such change was authori
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida S by e-named corporation submits this statement for the purpose of changing its registered by the corporation's board of directors. I hereby accept the appointment as registered SIGNATURE gent signature required whon reinstating Signature, typed or printed name of registered agent and little if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. DELETE Change Addition TITLE SANDERS, FRANK J. NAME, 10300 PENSACOLA BLVD. T ADDRESS STREET ADDRESS ST-ZIP PENSACOLA FL CITY-ST-ZIP DELETE Addition Change TITLE NAME ADDRESS STREET ADDRESS ST-ZIP CITY-ST-ZIP DELETE ☐ Change Addition TITLE NAME F ADDRESS STREET ADDRESS ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE NAME ADDRESS STREET ADDRESS T- ZIP CITY - ST - ZIP DELETE ☐ Addition TITLE NAME ADDRESS STREET ADDRESS CITY-ST-ZIP DELETE Addition 400002417744 -02/02/98--01004--027 TITLE NAME ADDRESS STREET ADDRESS ***150,00 14. I hereby certify that the information supplied with this filing does not qualify for the ction 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 art 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 executiveport 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.

T. SANDERS 850-474-026