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

Block 12 or Block 13 if changed for on an attachment wit

PROFIT Apr 13 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT #
1. Corporation Name J83825 (6)L D C OF MANATEE, INC. Principal Place of Business Mailing Address 5407 21ST AVE W 5407 21\$T AVE W **BRADENTON FL 34209 BRADENTON FL 34209** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/20/1987 2. Principal Place of Business 2a. Mailing Address Applied For 59-2839 183 26 Not Applicable Suite, Apt. #. etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 29 30 Personal Property Tax due June 30. Yes □ No 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name WHITAKER, CHARLES C. JR 5407 21ST AVE W 82 Street Address (P.O. Box Number is Not Acceptable) **BRADENTON FL 34209** 83 84 City Zip Code 85 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) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE PD DELETE 1.1 TITLE Change Addition NAME WHITAKER, CHARLES C. JR 12 NAME 5407 21ST AVE W STREET ADDRESS 1.3 STREET ADDRESS **BRADENTON FL** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE VD. 2.1 TITLE Change Addition JEFFRIES, LUCILE W. NAME 2.2 NAME **5222 WYNTERHALL WAY** STREET ADDRESS 2.3 STREET ADDRESS ATLANTA GA CITY-ST-ZIP 2.4 CITY-ST-ZIP TITLE DELETE 3.1 TITLE Change Addition NAME BREEZE, DOROTHY W. 3.2 NAME **4040 DOROTHY DRIVE** STREET ADDRESS 3.3 STREET ADDRESS **CUMMING GA** CITY-ST-ZIP 3.4. CITY - ST - ZiP DELETE TITLE 4.1 TITLE Change Addition NAME 4, 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5 4 CITY-ST-ZIP DELETE TITLE 6.1 TITLE Change ___ Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST - ZIP 14. Thereby certify that the information supplied with this filling 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 eath; 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

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