**FILED** FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 PROFIT Feb 02 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (2)THE RAW LAND COMPANY Principal Place of Business Mailing Address P O BOX 45022 P O BOX 45022 JACKSONVILLE FL 32232 JACKSONVILLE FL 32232 DO NOT WRITE IN THIS SPACE Date Incorporated or Qualified. 09/14/1987 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-2853291 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaigh Financing 23 28 Trust Fund Contribution Added to Fees Zip Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 Personal Property Tax due June 30. ☐ Yes 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 RINGHAVER, RANDAL L 8050 PHILLIPS HWY 82 Street Address (P.O. Box Number is Not Acceptable) JACKSONVILLE FL 32256 83 84 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 change was authorized by the corporation's board of directors. I hereby accept the appointment as 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition 1.1 TITLE TITLE RINGHAVER, RANDAL L 1.2 NAME NAME 8050 PHILLIPS HWY STREET ADDRESS 1.3 STREET ADDRESS JACKSONVILLE FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE RINGHAVER, RANDAL L NAME 2.2 NAME 8050 PHILLIPS HWY 2.3 STREET ADDRESS STREET ADDRESS JACKSONVILLE FL CITY - ST - ZIP 2. 4 CITY - ST - ZIP DELETE 3.1 TITLE Change Addition TITLE NAME 3,2 NAME STREET ADDRESS 3,3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE 4, 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS

14. I hereby 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 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.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

B 1 TITLE 6.2 NAME

SIGNATURE:

CITY - ST - ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

DELETE

1/27/98

Change

Addition

**CR2E034**