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

FILED PROFIT Apr 29 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # J98052 (0) GOODTIME PRINTING, INC. Principal Place of Business Mailing Address 1522 E SILVER SPRINGS BLVD 1522 E SILVER SPRINGS ROAD OCALA FL 34470-6818 OCALA FL 34470-6818 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/09/1987 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 59-2858386 21 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 8. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country 8. This corporation owes or has paid the current year intangible 24 25 29 30 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent James K. Green GUILFOIL PAUL J. 225 N.E. 8TH AVENUE Street Address (P.O. Box Number is Not Acceptable) 1522 E. Silver Springs Boulevard 82 **OCALA FL 32670** 83 84 City Ocala, 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. James K. Green **SIGNATURE** OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE ☐ DELETE 1.1 TITLE Change GREEN, JAMES K. 1.2 NAME STREET ADDRESS 2401 N.E. 35TH ST. 1.3 STREET ADDRESS OCALA FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 21 TITLE GREEN, MARIE NAME 2.2 NAME STREET ADDRESS 2401 N.E. 35TH ST. 2.3 STREET ADDRESS OCALA FL CITY-ST-ZIP 2. 4 CITY - ST - ZIP President Change **K** DELETE Addition TITLE 3.1 TITLE GREEN, JAMES K. Marie Green NAME 3.2 NAME 2401 N.E. 35th Street STREET ADDRESS 529 N.E. FIRST AVE. 3.3 STREET ADDRESS OCALA FL Ocala, Florida 34470 CITY-ST-ZIP 3.4. CITY-ST-ZIP ■ DELETE Change Addition 4.1 TITLE GREEN, JAMES K. 4. 2 NAME STREET ADDRESS 529 N.E. FIRST AVE. 4.3 STREET ADDRESS CITY-ST-ZIP OCALA FL 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME WHITE, ROBERT LEE 5.2 NAME STREET ADDRESS 4900 NE 11TH ST 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 chapter 607, or on an attachpoint with an address.

5.4 CITY-ST-ZIP

63 STREET ADDRESS 6.4 CITY-ST-ZIP

6.1 TITLE

62 NAME

DELETE

SIGNATURE

OCALA FL

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

Marie Green

4/23/98

(352) 629-8838

Addition