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

NAME

STREET ADDRESS CITY-ST-ZIP

Block 12 or Block 13 if change

FILED Aug 12 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1**9**98 DIVISION OF CORPORATIONS DOCUMENT # K16646 RUDDY EAGLE, INC. Principal Place of Business Mailing Address 2855 66TH ST 2855 66TH ST SW NAPLES FL 33999 SW NAPLES FL 33999 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/29/1988 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0030102 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5, Certificate of Status Desired 22 27 Fee Required City & State City & State 6, Election Campaign Financing \$5.00 May Be Added to Fees 23 Trust Fund Contribution 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Yes 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent RUMBERGER, WILSON J. 2855 66TH ST **B2** Street Address (P.O. Box Number is Not Acceptable) SW NAPLES FL 33999 83 84 City 85 Zip Code 10 607. S08, Florida Statules, the above-named corporation submits this statement for the purpose of changing its registered londs. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered in of Section 607.0505, Florida Statutes. 11. Pursuant to the ions of Settions 607.0002 a agent. Lam la Netered Agent signature required when reinstatung) SIGNATURE 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 1 1 TITLE NAME RUMBERGER, EDWARD A. 1.2 NAME 1400 GULF SHORE BLVD. STREET ADDRESS 1.3 STREET ADDRESS NAPLES FL CITY-ST-ZIP 1.4 CITY - ST - ZIP DST DELETE Addition THTLE Change 2.1 TITLE **RRUMBERGER WILSON J** NAME 2.2 NAME 2855 66TH ST SW STREET ADDRESS 2.3 STREET ADDRESS NAPLES FL CITY-ST-7IP 2. 4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE ☐ Change ___ Addition NAME 32 NAME STREET ADDRESS **33 STREET ADDRESS** CITY-ST-ZIP 3 4. CITY - ST - ZIP DELETE Change 4 1 TITLE Addition 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Addition 6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP 14. Thereby certify that the information supplied with this filing does not qualify to 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 of the receiver of rustee empowered to execute this eport as required by Chapter 607, Florida Statutes; and that my name appears in

09/2/08