SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/1/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 (8)**DOCUMENT #** K35847 MILL DAM CORPORATION Principal Piace of Business Mailing Address 8700 CARRIAGE GREENS DRIVE 8700 CARRIAGE GREEN DRIVE **8700 CARRIAGE GREENS DRIVE** 8700 CARRIAGE GREEN DRIVE 3a. Date of Last Report DARIEN IL 80559 3. Date Incorporated or Qualified DARIEN IL 60559 10/03/1988 Applied For 4. FEI Number 2a. Mailing Address 2. Principal Place of Business 58-1811397 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt #, etc 5. Certificate of Status Desired Fee Required 27 22 \$5.00 May Be City & State 6. Election Campaign Financing City & State Added to Fees Trust Fund Contribution 28 23 8. This corporation has liability for intangible tax under s. 199.032 Country Ζıp Ζip Country Yes No 30 29 24 Name and Address of New Registered Agent Name and Address of Current Registered Agent BRODERICK, DENNIS J. 82 640 NORTH ATLANTIC AVE. **DAYTONA BEACH FL 32018** 83 84 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. Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. BRIAN BROKERER EXECUTOR, OF THE 12. Change Addition DELETE . DPS TITLE 1.2 NAME BRODERICK, DENNIS J. NAME 1.3 STREET ADDRESS 640 N. ATLANTIC AVE. ESTATE OF DENIS BRODERICK Change | Addition STREET ADDRESS 1.4 CISY - ST-ZIP DAYTONA BEACH FL CITY - ST - ZIP DELETE 21 1114 TITLE 22 NAME NAME SAME ADDRESS 2.3 STREET ADDRESS STREET ADDRESS 2 4 C1TY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 3.1 TiTLE TITLE 3.2 NAME NAME 33 STREET ADDRESS STREET ADDRESS 3 4 CiTY - S1 - ZIP CITY-ST-ZIP Change Addition DELETE 4111116 TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4.CIFY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 5 1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5 4 CHY - ST - ZIP 6000019102B@inge | Addition -08/01/96--01015--040 CITY - ST - ZIP DELETE 61 TITLE 🗼 TITLE 62 NAME . NAME ***225.00 63 STREET ADDRESS STREET ADDRESS 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 it made under oath, that I am an officer or director of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 617, Florida Statutes, and that my rapple appears in Right 12 or Block 13. I chaptered or one as attachment with an addition.

that my name appears in Block