PROFIT CORPORATION ANNUAL REPORT 1998		ING FEE AFTI	FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS			ATE	FILED May 04 1998 8:00am Secretary of State	
DOCUMENT # K39901 1. Corporation Name GLORIDAYS OF PINELLAS, INC.			(9)					
Principal Plac 1903 DORMIE 8T. PETERSB US			Mailing Address 100 COLBURN PT. CHAPEL HILL NC 27516-8073 US				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/19/1988	
2. Principal F	lace of Business	20	2a. Mailing Address				4. FEI Number Applied For	
21]			Suite, Apt. #, etc.				59-2417077 Not Applicable	
Suite, Apt. #, etc.			Suite, Apt. #, etc.		ł		5. Certificate of Status Desired Service Servi	
City & State			City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip	i ——	untry	Zip	-	untry		8. This corporation owes or has paid the current year Intangible	
24	25 9. Name and Ad	29 ddress of Current Reg		30	1		Personal Properly Tax due June 30. Yes No 10. Name and Address of New Registered Agent	
11. Pursuani	ANDON FL 33511	Sections 607 0502 and	607. 1508. Florida Statut	es, the a	83 84 (City	FL 85 Zip Code	
office or r agent. I a SIGNATURE	egistered agent, or t m familiar with, and	both, in the State of Flo accept the obligations	rida. Such change was i of, Section 607.0505, Fli	authorize orida Sta	d by th tutes.	ne corpora	ation's board of directors. I hereby accept the appointment as registered	
12.		OFFICERS AND DIRE	CTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS	CHADEL HILL MC		i i		iame Treet ad		☐ Change ☐ Addition 5	
TITLE NAME STREET ADDRESS	WERER, PAIA. 100 COLDURN PT.		DELETE 211				☐ Change ☐ Addition	
CITY-ST-ZIP TITLE NAME CIPEET ADDORSES	CHAPEC HIDS NC THODES, LORI 100 COLBURN PT.		☐ DELETE 3.1		2. 4 CITY - ST - ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS		☐ Change ☐ Addition	
STREET ADDRESS CITY-ST-ZIP TITLE NAME	CITY-ST-ZIP CHAPEL HILL NC				CITY-ST- ITLE		☐ Change ☐ Addition	
STREET ADDRESS CITY-ST-ZIP TITLE			DELETE				☐ Change ☐ Addition	
STREET ADDRESS CITY-ST-ZIP TITLE			☐ DELETE.	5.3 \$	TREET AD		☐ Change ☐ Addition	

NAME

STREET ADDRESS

and the second of the second of

14. I hereby certify that the information supplied with this filing 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 trusted 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.

SIGNATURE:

6.2 NAME

6.3 STREET ADDRESS