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

NAME

STREET ADDRESS

SIGNATURE:

FILED Mar 31 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # K49501 (5)FAN AMERICA, INC. Principal Place of Business Mailing Address 1748 INDEPENDENCE BLVD. 1748 INDEPENDENCE BLVD. STE G4 DO NOT WRITE IN THIS SPACE SARASOTA FL 34234 SARASOTA FL 34234 US 3. Date Incorporated or Qualified 12/06/1988 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0093246 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May 8e 23 28 Trust Fund Contribution Added to Fees Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes \square No 30 Personal Property Tax due June 30. 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name **BLOMSTER, RAINER** 1712 NORTHGATE BLVD Street Address (P.O. Box Number is Not Acceptable) 82 SARASOTA FL 34234 83 84 City 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 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. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 1.1 TITLE **BLOMSTER, RAINER** NAME 1.2 NAME 1712 NORTHGATE BLVD STREET ADDRESS 1.3 STREET ADDRESS SARASOTA FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition Change MILE 21 TITLE **BLOMSTER, RAINER** 2.2 NAME NAME 1712 NORTHGATE BLVD STREET ADDRESS 2.3 STREET ADDRESS SARASOTA FL CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE BLOMSTER, RAINER NAME 3.2 NAME 1712 NORTHGATE BLVD STREET ADDRESS 3.3 STREET ADDRESS SARASOTA FL CITY-ST-ZIP 3.4. CITY - ST - 7IP DELETE TITLE 4.1 TITLE Change Addition NAME PYE. MARION L 4. 2 NAME 1748 INDEPENDENCE BLVD STE F5 STREET ADDRESS 4.3 STREET ADDRESS SARASOTA FL CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 52 NAME STREET ADDRESS **53 STREET ADDRESS** 5.4 CITY - ST - ZIP CITY-ST-ZIP DELETE 61 TITLE Change Addition TITLE

6.2 NAME

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 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 tougand 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 3 if changed, or on an attachment with an address.

3-26-98

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