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

PROFIT CORPORATION ANNUAL REPORT

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

Feb 25 1998 8:00am Secretary of State

DOCUI 1. Corporation ADMINI	MENT n Name ISTRATIO		32	(7)					<u>iji 1774 8484 9444 6484 184</u> 1
Principal Place	e of Busines	s	Mailing	Mailing Address				a nominiat noi bibli bodin disan isila iloj nigil dia	in dirin dirin dirin dispin 1994
2536 COUNTRYSIDE BLVD. CLEARWATER FL 34623			2536	2536 COUNTRYSIDE BLVD. CLEARWATER FL 34623				DO NOT WRITE IN THIS	SPACE
								3. Date Incorporated or Qualified	
								01/11/1989	
2. Principal P	lace of Busin	ess	hŋ	2a, Mailing Address				4. FEI Number	Applied For
Suite, Apt	#. elc.		26	Suite. Apt. #, etc.				59-2927116	Not Applicable \$8.75 Additional
22	,		F1	27				5. Certificate of Status Desired	Fee Required
City & State	0			City & State				6. Election Campaign Financing	\$5.00 May Be
23	· · · · · · · · · · · · · · · · · · ·		28					Trust Fund Contribution	Added to Fees
Zip 24	Country 25 29		— h	Zip Country		У		 This corporation owes or has paid the corporation owes or has paid the corporation. 	urrent year Intangible ₩Yes ☐ No
	9. Name	and Address of Cu	rrent Registere	d Agent				10. Name and Address of New Registered	l Agent
	UDNA, HE				B1	Name			
2536 COUNTRYSIDE BLVD					82	Street	Address (P.O. Box Number is Not Acceptable)		
SIXTH FLOOR					8:	. 			
CLI	EARWATER	FL 34823			•	'			
					84	City		Fi	85 Zip Code
office or n	egistered ac	ions of Sections 607. ent, or both, in the S th, and accept the ol	tate of Florida S	iuch change was	authorized b	v the core	corpor	ation submits this statement for the purpose n's board of directors. I hereby accept the ap	of changing its registered pointment as registered
SIGNATURE	Signature broad	or proted have of registere	Largest and leter diagram	leable (NC	IL Registered A	ent signature	required	when reinstating) DATE	
12.			AND DIRECTOR		13.			ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE	PD Benson, Robert			DILFTE	DELETE 1.1 TITLE				☐ Change ☐ Addition
NAME		1.2 NAME	1.2 NAME						
STREET ADDRESS 2536 COUNTRYSIDE BLVD, 6TH						T ADDRESS			
CITY-ST-ZIP		VATER FL		- Driver		1.4 CITY-ST-ZIP			Change Addition
TITLE	ST	MAL D MALIDY		L DELETE	2 1 FITLE				Change Addition
NAME	THORNTON, R MAURY 2536 COUNTRYSIDE BLVD, 6T					2.2 NAME			
STREET ADDRESS		VATER FL	, oin fl	, rt.		2 3 STREET ADDRESS 2 4 CITY-ST-ZIP			
CITY-ST-ZIP TITLE	CEO	TAILETT I L		DELF TE	3 1 TITLE	01" LIF			☐ Change ☐ Addition
NAME	PEPE, W. DENNIS				3 2 NAME		1		- –
STREET ADDRESS						3 3 STREET ADDRESS			
CITY-ST-ZIP CLEARWATER FL						3.4 CITY-ST-ZIP			
TITLE				DELETE	4.1 TITLE		VP		Change X Addition
NAME					4. 2 NAMI			RK, CHRISTOPHER	
STREET ADDRESS					4.3 STREE	1 ADDRESS	25.	36 Countryside Blvd.	, Sixth FL
CITY - ST - ZIP					4 4 CITY-	ST-ZIP	Cle	earwater, FL 34623	
TITLE				☐ DELETE	5.1 TITLE		[Change Addition
NAME					5.2 NAME				
STREET ADDRESS						T ADDRESS			
CITY-ST-ZIP TITLE	<u> </u>		· · · · · · · · · · · · · · · · · · ·	DELETE	5.4 CHTY- 6 1 TITLE	S(-ZIP	 		Change Addition
NAME				L. CALCIL	6.2 NAME				
STREET ADDRESS					•	T ADDRESS	\		
CITY-ST-ZIP					64 CITY-				
	portify that the	a information and all	el sulli thie filmes	done not quality			A in Se	action 119 07/3/(i) Florida Statutes I further o	artifu that the information

Thereby serving that the information in section 1907(3)(i), Florida Statutes. Further certify that the information indicated on this annual report or suppliemental 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 system 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 why am Address.

Maury Thornton Sec/Treas 2/16/98 (813)726-0726