FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 Apr 21 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # K59691 (1)SARAH R. BRADLEY, INC. Principal Place of Business Mailing Address 10225 ULMERTON RD. PO BOX 502 SHITE 4-D INDIAN ROCKS BCH. FL 34635 DO NOT WRITE IN THIS SPACE LARGO FL 34640 3. Date Incorporated or Qualified 01/20/1989 2. Principal Place of Businoss 1 / 426 TURNER ST 26. Mailing Address 4. FEI Number Applied For 1226 TURNER ST 59-2924335 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Suire Fee Required \$5.00 May Be 6. Election Campaign Financing CLEARWATER, FL CLBARWATER, FL Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Inlangible Personal Property Tax due June 30. Yes \(\bigcap \text{No}\) Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent BRADLEY, SARAH R. Street Address (P.O. Box Number is Not Acceptable) **500 BELCHER ROAD SOUTH** 82 BLDG. 12, STE 179 TURNER 83 LARGO FL 34641 Zip Code 33756 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 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 1 am familia with, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE SIGNATURE SIGNATURE SIGNATURE SAME) PRESIDENT4-6-98 POUTED WHOM reinstalling) OFFICERS AND DIRECTORS 12. DELETE 1.1 TITLE TITLE SAME BRADLEY, SARAH R. NAME 1.2 NAME 500 BELCHER ROAD SO., STE 179 STREET ADDRESS 1.3 STREET ADDRESS LARGO FL CITY - ST-7IP 1.4 CITY - ST - ZIP Addition DELETE TITLE 2.1 TITLE NAME 2.2 NAME 2.3 STREET ADDRESS STREET ADORESS 2.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE 3 1 TITLE Change 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 34. CITY-ST-ZIP DELETE Addition 4.1 TITLE TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 DITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - \$T - ZIP CITY-ST-ZIP

14. Thereby 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 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 receivor or trustee 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.

6.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

SIGNATURE:

TITLE

NAME

STREET ADDRESS

SOLARL K. MARING OFFICER OF DIRECTOR

DELETE

res.

4-6-98

813-447-7888

Change

Addition

CR2E034