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

LLOBIDA DEPARTMENT OF STATE

PROFIT

May 20 1998 8:00am CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # K76236 MAINE PROPERTY HOLDINGS, INC. Principal Place of Business Mailing Address % STEVEN A. UITERWYK % STEVEN A. UITERWYK POST OFFICE BOX 1321 POST OFFICE BOX 1321 DO NOT WRITE IN THIS SPACE TAMPA FL 33601 TAMPA FL 33601 3. Date Incorporated or Qualified 03/24/1989 2. Principal Place of Business 2a. Mailing Address FFI Number Applied For 59-2966582 Not Applicable Suite, Apr. 18 etc. P.O. B. × 2325 \$8.75 Additional .0. Box 2325 5. Certificate of Status Desired Fee Required 22 27 City & State FI. 6. Election Campaign Financing \$5.00 May Be Tang Trust Fund Contribution Added to Fees 23 28 Country 8. This corporation owes or has paid the current year Internalible 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 Steven Witchwah UITERWYK, STEVEN A 1307 W. KENNEDY BOULEVARD 82 TAMPA FL 33606 83 guite 240 84 City 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 beingations of Section 607.0505, Florida Statutes. 10 **SIGNATURE** (NOTE: Registered Agent signature required when reinstating) ame of registered agent and ellent applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. steven Witgrungh DELETE 11 TITLE TITLE 100 w. Kennedy Blud UITERWYK, STEVEN A 1.2 NAME NAME STREET ADDRESS 1307 W. KENNEDY BOULEVARD 1.3 STREET ADDRESS TAMPA FL 33606 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE 2.1 TITLE Change Addition TITLE NAME 22 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition 3 1 TITLE TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3 4. CITY-ST-ZIP CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 THILE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 6.4 CiTY - ST - 7IP 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 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.

FILED

5/10/96