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

NAME

STREET ADDRESS

FILED May 26 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # K76709 (0) BLACK HILLS FLORIDA CHARTERS, INC. Principal Place of Business Mailing Address 2504 W MAIN POB 2860 2504 W MAIN POB 2860 RAPID CITY SD \$7709 RAPID CITY SD 57709 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/29/1989 2. Principal Place of Business 2a. Mailing Address Applied For 21 65-0111009 Not Applicable 26 Suite, Apl. #, etc. Suite, Apt #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Zip Country Country 8. This corporation owes or has paid the current year Intangible ☐ Yes □ No 24 Personal Property Tax due June 30. 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B1** Name OLSON, PAUL E BURGESS, HARRELL, MANCUSO & OLSON P.A. 82 Street Address (P.O. Box Number is Not Acceptable) 2033 MAIN ST., SUITE 300 83 SARASOTA FL 34237 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, typod or printed name of registered agent and title if applicable OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. ☐ DELETE TITLE 1.1 TITLE Change Addition MOYLE, GILBERT D. 12 NAME NAME 2504 W MAIN, P.O. BOX 2860 STREET ADDRESS 1.3 STREET ADDRESS RAPID CITY SD CITY-ST-ZIP 1.4 CiTY - ST - ZIP DELETE TITLE 2.1 TITLE Change Addition MENTELE STEVE E. NAME 2.2 NAME 2504 W MIAN, P.O. BOX 2860 STREET ADDRESS 2.3 STREET ADDRESS RAPID CITY SD CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE 3.1 TITLE Change ■ Addition TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Addition 4 1 TITLE TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP Addition DELETE TITLE 5.1 TITLE Change NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP Change DELETE TITLE 61 TITLE Addition 1000025362

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 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 attachin 1./22 /aq (605)212-1066

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.2 NAME

-05/27/98--01029--023

***150.00