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STREET ADDRESS

CIGNATURE:

FILED Apr 15 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT** # (6)HARBOUR MANAGEMENT, INC. Principal Place of Business Mailing Address 16815 ROLLING ROCK DRIVE 16815 ROLLING ROCK DRIVE ST. PETERSBURG FL \$3616 ST. PETERSBURG FL 33618 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 05/02/1989 2. Principal Place of Business 2a. Mailing Address Applied For 59-2999038 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Country Zψ Country 8. This corporation owes or has paid the current year Intangible Yes 30 Personal Property Tax due June 30. 29 24 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name EPPERSON, GLORIA J 16815 ROLLING ROCK DRIVE Street Address (P.O. Box Number is Not Acceptable) ST. PETERSBURG FL 33616 83 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 OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1 12. - allaie TITLE 1.1 TITLE NAME EPPERSON, DAVID C 1.2 NAME STREET ADDRESS 8500 BELCHER RD 1.3 STREET ADDRESS PINELLAS PARK FL 33710 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE EPPERSON, GLORIA J NAME 2.2 NAME 16815 ROLLING ROCK DRIVE STREET ADDRESS 2.3 STREET ADDRESS ST. PETERSBURG FL 33618 2. 4 CITY - ST - ZIP CITY-ST-ZIF Addition DELETE President Change TITLE 3.1 TITLE J. EDDETSON NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-S1-ZIP 3.4. CITY-ST-ZIP DELETE Addition Change TITLE 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 5.1 TITLE Change ■ Addition TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST+ZIP CITY-ST-ZIP Addition DELETE Change 6.1 TITLE TITLE NAME 6.2 NAME

6.3 STREET ADDRESS

99 (812)908-7170

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.