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

CITY-ST-ZIP

SIGNATURE:

**FILED PROFIT** Mar 20 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # K87447 (4) H. U. BAKER COMPANY, INCORPORATED Principal Place of Business Mailing Address 1746 GOLFVIEW DR. 1746 GOLFVIEW DR. CLEARWATER FL 34616 **CLEARWATER FL 34616** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/11/1989 Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 48-5208004 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. ☐ Yes g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name Gassman, Alan S. 1245 CT. ST. 82 Street Address (P.O. Box Number is Not Acceptable) **SUITE 102** 83 **CLEARWATER FL 34616** 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 Signature, typed or printed name of registered agent and title if approable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. □ DELETE TITLE 1.1 TITLE Change Addition BAKER, HOWARD U. NAME 1.2 NAME 1746 GOLFVIEW DR. STREET ADDRESS 1.3 STREET ADDRESS CLEARWATER FL 34616 CITY-ST-ZIP 1.4 City-St-ZiP DELETE TITLE 2.1 TITLE ☐ Change ☐ Addition BAKER, HAZEL . NAME 2.2 NAME 1746 GOLFVIEW DR. STREET ADDRESS 2.3 STREET ADDRESS **CLEARWATER FL 34616** CITY-ST-ZIP 2.4 CITY-ST-ZIP TITLE ☐ DELETE 3.1 TITLE Change Addition BAKER, ROBERT W. 3.2 NAME 105 HUTTON ST. STREET ADDRESS 3.3 STREET ADDRESS **GAITHUSBURG MD 20877** CITY-ST-ZIP 3.4. CITY-ST-2(P 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 TITLE DELETE 5.3 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIF 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** 

6.4 CITY-ST-ZiP 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.

7-14-97