SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 18, 1995.
AMOUNT DUE ON OR BEFORE 5/18/95: $235 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $275)

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 APR 26 AM 9:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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-04/28/95--01071--019
****200.00 ****200.00

DOCUMENT # K88692 (4)

1. Corporation Name
COUNTRY DUDE PROPERTIES, INC.

Mailing Address
C/O ~~DAVID A. MCKIBBIN~~
~~1111 LINCOLN ROAD MALL SUITE 500~~
~~MIAMI FL 33139~~
c/o F.W. LUCAS
18215 COLLINS AVE
MIAMI BEACH FL 33160

Principal Place of Business
~~C/O DAVID A. MCKIBBIN~~
~~1111 LINCOLN ROAD MALL SUITE 500~~
~~MIAMI FL 33139~~
SAME

If above addresses are incorrect in any way, line through incorrect information and enter correction below

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 05/16/1989
3a. Date of Last Report: 02/26/1993

2. Mailing Address
21: 18215 COLLINS AVE
22: Suite, Apt. #, etc.
23: City & State: MIAMI BEACH FL
24: Zip: 33160
25: County: DADE

2a. Principal Place of Business
26: 18215 COLLINS AVE
27: Suite, Apt. #, etc.
28: City & State: MIAMI BEACH FL
29: Zip: 33160
30: County: DADE

4. FEI Number: 65-0177752
Applied For ☐
Not Applicable ☐

5. Certificate of Status Desired
$8.75 Additional Fee Required ☐

6. Election Campaign Financing Trust Fund Contribution ☐
$5.00 May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

~~MCKIBBIN, DAVID A~~
~~1111 LINCOLN ROAD MALL~~
~~SUITE 500~~
~~MIAMI BEACH FL 33139~~

10. Name and Address of New Registered Agent

81 Name: F. W. LUCAS
82 Street Address (P.O. Box Number is Not Acceptable): 18215 COLLINS AVE
83:
84 City: MIAMI BEACH FL 85 Zip Code: 33160

11. Pursuant to the provisions of Sections 607.0502 and 607.1508 or Sections 617.0502 and 617.1508, 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 or 617.0503, Florida Statutes.

SIGNATURE: F.W. Lucas — 4-14-95
(Typed or printed name of registered agent and title if applicable) (Registered Agent signature required when resigning) DATE

12. OFFICERS AND DIRECTORS		13. CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE	D	11 TITLE	D Pres.
12 NAME	LUCAS, FRANCIS W.	12 NAME	
13 STREET ADDRESS	18215 COLLINS AVE.	13 STREET ADDRESS	
14 CITY ST ZIP	MIAMI BEACH FL	14 CITY ST ZIP	33160
21 TITLE		21 TITLE	D. V. Pres
22 NAME		22 NAME	Robert F. Lucas
23 STREET ADDRESS		23 STREET ADDRESS	18215 Collins Ave
24 CITY ST ZIP		24 CITY ST ZIP	Miami Beach Fl 33160
31 TITLE		31 TITLE	
32 NAME		32 NAME	
33 STREET ADDRESS		33 STREET ADDRESS	
34 CITY ST ZIP		34 CITY ST ZIP	
41 TITLE		41 TITLE	
42 NAME		42 NAME	
43 STREET ADDRESS		43 STREET ADDRESS	
44 CITY ST ZIP		44 CITY ST ZIP	
51 TITLE		51 TITLE	
52 NAME		52 NAME	
53 STREET ADDRESS		53 STREET ADDRESS	
54 CITY ST ZIP		54 CITY ST ZIP	4/26/95 WB
61 TITLE		61 TITLE	
62 NAME		62 NAME	
63 STREET ADDRESS		63 STREET ADDRESS	
64 CITY ST ZIP		64 CITY ST ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this original 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 or Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: F.W. Lucas — FRANCIS W LUCAS Pres — 4-14-95
SIGNATURE AND TYPED OR PRINTED NAME OF DIRECTOR OR OFFICER — Date — Daytime Phone #

0053584