FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 May 12 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 #** (3)FRANKLIN INVESTMENT GROUP, INC. Principal Place of Business Mailing Address W KENNETH R. STICKLER **% KENNETH R. STICKLER** P.O. BOX 3867 WINTER SPRINGS FL 32708 P.O. BOX 3867 WINTER SPRINGS FL 32708 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/25/1989 Principal Place of Business Applied For 59-2949807 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees This corporation owes or has paid the current year Intangible us A Personal Property Tax due June 30. ☐ Yes 10. Name and Address of New Registered Agent ss of Current Registered Agen Name stickler, kenineth r. 1211 HOWELL CREEK DR. Street Address (P.O. Box Number is Not Acceptable) 82 WINTER SPRINGS FL 32708 83 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** Signature, typed or printed native of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change 1 1 TITLE TITLE STICKLER, KENNETH R. NAME 1.2 NAME 1211 HOWELL CREEK DR. STREET ADDRESS 1.3 STREET ADDRESS WINTER SPRINGS FL Summerprerd 1.4 CITY-ST-ZIP CITY-ST-ZIP **c**nange DELETE Addition 2.1 TITLE STICKLER, GWEN E. BOR RD. 1211 HOWELL CREEK DR. STREET ADDRESS 2.3 STREET ADDRESS 34491 WINTER SPRINGS FL 2. 4 CITY - ST-ZIP CITY-ST-ZIP DELETE 3 1 TITLE Addition TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE ☐ Change Addition TITLE 4.1 TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Addition TITLE 5.1 TiTLE

4. 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 receivor 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.

5.2 NAME

6.1 TITLE

62 NAME

DELETE

5.3 STREET ADDRESS

63 STREET ADDRESS 6.4 CITY - ST- ZIP

5.4 CITY - ST-ZIP

SIGNATURE:

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

KENNETH R. STICKLER 4/29/98

CR2E034 (10/97

Change

Addition