FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **PROFIT** FLORIDA DEPARTMENT OF STATE

CORPORATION ANNUAL REPORT

1998

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(8)

WHITEHEAD STREET POTTERY, INC.

Principal Place of Business Mailing Address

FILED Jan 20 1998 8:00am Secretary of State



C/O TIMOTHY J. ROEDER C/O TIMOTHY J. ROEDER 1011 WHITEHEAD STREET 1011 WHITEHEAD STREET DO NOT WRITE IN THIS SPACE KEY WEST FL 33040 KEY WEST FL 33040 3. Date Incorporated or Qualified 08/15/1989 2. Principal Place of Business 2a. Mailing Address Applied For 4. FEI Number 21 26 65-0172144 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Country Zìp Country 8. This corporation owes or has paid the current year Intangible ☐ Yes 24 30 Personal Property Tax due June 30. 25 29 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 Name ROEDER, TIMOTHY J. 1011 WHITEHEAD STREET 82 Street Address (P.O. Box Number is Not Acceptable) KEY WEST FL 33040 83 84 Zip Code

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 Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable DATE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13 DELETE 1.1 TITLE Change Addition TITLE ROEDER, TIMOTHY J. NAME 1.2 NAME 1011 WHITEHEAD ST. STREET ADDRESS 1.3 STREET ADDRESS KEY WEST FL 1,4 CITY-ST-ZIP CITY-ST-ZIP ___ DELETE Change Addition 21 TITLE TITLE PEARSON, CHARLES 2.2 NAME NAME 1011 WHITEHEAD ST. 2.3 STREET ADDRESS STREET ADDRESS KEY WEST FL CiTY-ST-ZIP 2. 4 CITY - ST - ZIP Addition DELETE 3.1 TITLE Change TITLE ROEDER, TIMOTHY J. NAME 3.2 NAME 1011 WHITEHEAD ST. STREET ADDRESS 3.3 STREET ADDRESS KEY WEST FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE Change Addition TITLE 4. 2 NAME NAME STREET ADDRESS 4,3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY - ST - ZIP TITLE DELETE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY - ST - ZIP 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 of 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 attachaged, with an actives.

SIGNATURE:

305-294-5067

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