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FILED
May 15 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L33058

(3)

1. Corporation Name

HOPS MARKETING, INC.

Principal Place of Business

3030 N ROCKY POINT DR WEST
SUITE 650
TAMPA FL 33607
US

Mailing Address

3030 N ROCKY POINT DR W
SUITE 650
TAMPA FL 33607
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/27/1989

4. FEI Number

59-2995842

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing



\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

FOWLER WHITE GILLAN BOGGS VILLAREAL AND BA
NKER, P.A., ATTN: R. ALAN HIGBEE
501 E. KENNEDY BLVD., SUITE 1700
TAMPA FL 33602

10. Name and Address of New Registered Agent

81 Name

CSC (per prior amendment dated 1/22/98)

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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 applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DP
NAME MASON, DAVID L.
STREET ADDRESS 3055 TURTLE BROOKE
CITY-ST-ZIP CLEARWATER FL ☒ DELETE

TITLE DV
NAME SCHELLDORF, THOMAS A.
STREET ADDRESS 170 GREENHAVEN CR
CITY-ST-ZIP OLDSMAR FL ☐ DELETE

TITLE VTSD
NAME TERENCE, TERENCE M
STREET ADDRESS 3030 N ROCKY POINT DR W SUITE 650
CITY-ST-ZIP TAMPA FL ☐ DELETE

TITLE D
NAME DUPREE, TOM E JR
STREET ADDRESS 3030 N ROCKY POINT DR W SUITE 650
CITY-ST-ZIP TAMPA FL ☐ DELETE

TITLE D
NAME KINSELL, KIRK
STREET ADDRESS 3030 ROCKY POINT DR W SUITE 650
CITY-ST-ZIP TAMPA FL ☐ DELETE

TITLE D
NAME BOOTH, ERICH J
STREET ADDRESS 3030 N ROCKY POINT DR W SUITE 650
CITY-ST-ZIP TAMPA FL ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME President, D
2.3 STREET ADDRESS Schelldorf, Thomas A.
2.4 CITY-ST-ZIP 3030 N. Rocky Point Drive West
Suite 650, Tampa, FL

3.1 TITLE ☒ Change ☐ Addition
3.2 NAME Terenzi, Terence M
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
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.

SIGNATURE:

4-21-98

P13-287 9350

CR2E034 (10/97)