FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
95 MAY -1 PM 2:53
SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # L48708 (6)

1. Corporation Name
LACOMBE, INC.

Principal Place of Business	Mailing Address
981 E. EAU GALLIE BLVD. MELBOURNE FL 32937	981 E. EAU GALLIE BLVD. MELBOURNE FL 32937

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/08/1990
3a. Date of Last Report: 05/09/1994
4. FEI Number: 59-3002811 — 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
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21 1505 N. HIGHWAY A1A	26 1505 N. HIGHWAY A1A
Suite, Apt #, etc: 22 502	Suite, Apt #, etc: 27 502
City & State: 23 INDIALANTIC FL	City & State: 28 INDIALANTIC FL
Zip: 24 32903 Country: 25 USA	Zip: 29 32903 Country: 30 USA

9. Name and Address of Current Registered Agent

LACOMBE, PAUL N.
981 E. EAU GALLIE BLVD.
MELBOURNE FL 32937

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable): 1505 N. HIGHWAY A1A
83 # 502
84 City: INDIALANTIC FL 85 Zip Code: 32903

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: Paul N. Lacombe PRESIDENT PAUL N. LACOMBE 4/30/95

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	LACOMBE, PAUL
STREET ADDRESS	981 E. EAU GALLIE BLVD.
CITY ST ZIP	MELBOURNE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☒ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS	1505 N. HIGHWAY A1A #502	
1.4 CITY ST ZIP	INDIALANTIC FL 32903	
2.1 TITLE		☐ Change ☐ Addition
3.1 TITLE		☐ Change ☐ Addition
4.1 TITLE		☐ Change ☐ Addition
5.1 TITLE		☐ Change ☐ Addition
6.1 TITLE		☐ Change ☐ Addition

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)(k), 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: Paul N. Lacombe PAUL N. LACOMBE — 4/30/95 — 407-729-9353
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0060642 CP