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FILED PROFIT FLORIDA DEPARTMENT OF STATE Jan 29 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (3)HICKMAN, HICKMAN, & MCCOY, INC. Principal Place of Business Mailing Address 800 NORTH OLIVE DRIVE 800 NORTH OLIVE DRIVE WEST PALM BEACH FL 33406 WEST PALM BEACH FL 33406 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/29/1990 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0198919 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country Country Zip 8. This corporation owes or has paid the current year Intangible ☐ Yes □ No 24 29 30 Personal Property Tax due June 30. 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name HICKMAN, WALLACE W. 1084 CARAMBOLA CIRCLE Street Address (P.O. Box Number is Not Acceptable) WEST PALM BEACH FL 33406 83 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: Register Agent signature required when reinstating) CR2E034 (10/97 12, OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☐ DELETE ___ Change ___ Addition TITLE 1.1 HICKMAN, WALLACE W. 1.2 NAME 1084 CARAMBOLA CIRCLE STREET ADDRESS EET ADDRESS W. PALM BEACH FL CITY - ST - ZIP Y-ST-ZIP DELETE Change TITLE 21 Addition HICKMAN, WALLACE W., JR. namė 2.2 ME 1084 CARAMBOLA CIRCLE STREET ADDRESS 2.3 STREET ADDRESS W. PALM BEACH FL CITY - ST - ZIF 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE MCCOY, JERRY D. NAME 3.2 NAME 1808 NORTH R ST. STREET ADORESS 3.3 STREET ADDRESS LAKE WORTH FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE Change Addition TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Addition 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

14. I hereby certify that the Information supplied with this filling 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 organ attachment with an actives.

753-6004