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CORPORATION ANNUAL REPORT

1998



ELORIDA DEPARTMENT DE STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M68025

(9)

FILED Jan 27 1998 8:00am Secretary of State

J.H. BENEDICT-VOLUSIA, INC. Principal Place of Business Mailing Address 40 N. PENNINSULA DRIVE 640 N. PENINSULA DRIVE DAYTONA BEACH FL 32118 DAYTONA BEACH FL 32118 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/12/1988 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For Not Applicable 21 59-2871058 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional П 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Country Zip This corporation owes or has paid the current year Intangible X Yes 24 Personal Property Tax due June 30. ☐ No 25 29 30 Name and Address of Current Registered Agent Name and Address of New Registered Agent BENEDICT, JAMES H. 81 Name 640 N. PENINSULA DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) DAYTONA BEACH FL 32118 83 84 City 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) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE 1 1 THTLE Change Addition TITLE BENEDICT, JAMES H. NAME 1.2 NAME 28 BAY POINT DRIVE STREET ADDRESS 1.3 STREET ADDRESS ORMOND BEACH FL CITY-ST-ZIP 1.4 CITY-ST-ZIP Change TITLE DELETE 2.1 TITLE Addition BENEDICT, MARGUERITE E. 2.2 NAME 28 BAY POINT DRIVE STREET ADDRESS 2.3 STREET ADDRESS ORMOND BEACH FL CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE ☐ Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST-ZIP 3.4. CITY-ST-ZIP DELETE ☐ Change ■ Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE 5.1 TITLE Change Addition TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CiTY - ST - ZIP DELETE Change Addition TITLE 61 TITLE 6.2 NAME NAME STREET ADDRESS 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