2008 FOR PROFIT CORPORATION ANNUAL REPORT

Secretary of State 01-14-2008 90105 031 ***158.75 DOCUMENT # M71329 SUPERIOR PROPERTIES, INC. 4000-3344 Principal Place of Business Mailing Address C/O GEORGE BUTLER, III C/O GEORGE BUTLER, III 6520 ANGUS DRIVE 6520 ANGUS DRIVE LAKELAND, FL 33809 LAKELAND, FL 33809 Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01122008 Chq-P CR2E034 (12/06) City & State Applied For City & State 4 FELNumber 59-2873323 Not Applicable ^{Zip} 33*810* \$8.75 Additional 33810 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BUTLER, GEORGE, III Street Address (P.O. Box Number is Not Acceptable) 6520 ANGUS DRIVE LAKELAND, FL 33809 Zip Code City 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and bitle if applicable (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution Added to Fees After May 1, 2008 Fee will be \$550.00 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. Addition ☐ Delete THE Change BUTLER, GEORGE, III NAME NAMÉ STREET ADDRESS 6520 ANGUS DRIVE STREET ADDRESS CITY-ST-ZIP LAKELAND, FL CITY-ST-ZIP TITLE ☐ Deleie ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ■ Addition THILE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete THUE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Delete TITLE Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-S1-ZIP 12. I hereby certify that the information supplied with this litting does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

TH Schild & GEORGE BUTTER 1/12/08
OF SIGNING OFFICER OR DIRECTOR

FILED Jan 14, 2008 8:00 am