FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M77088 (6)

* *** · **

FILED

Mar 23 1998 8:00am

Secretary of State

THE BLUE JILLION CORPORATION Principal Place of Business Mailing Address 200 AVE B NW P O BOX 194 WINTER HAVEN FL 33880 WINTER HAVEN FL 33883 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/19/1988 2, Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2899200 Not Applicable 21 26 Suite, Apt #, etc. Suite, Apt. #, etc. \$8.75 Additional 5, Certificate of Status Desired Fee Required 22 City & State City & State 6, Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Zip Country Country Zip 8. This corporation owes or has paid the current year Intangible ☐ Yes 24 30 Personal Property Tax due June 30. 25 29 10. Name and Address of New Registered Agent g, Name and Address of Current Registered Agent Name STRANG, CARL J III 200 AVE B NW 82 Street Address (P.O. Box Number is Not Acceptable) 2ND FL 63 WINTER HAVEN FL 33881 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 registored 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, if 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 applicat (NOTE: Registered Agent signal when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 D DELETE Change Addition TITLE NAME STRANG, CARL J., III 1.2 NAME 200 AVENUE B. NW 1.3 STREET ADORESS STREET ADDRESS WINTER HAVEN FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELÈTE 2.1 TITLE Change Addition NAME STRANG, JOHN W. 2.2 NAME STREET ADDRESS 690 W. LAKE OTIS 2.3 STREET ADDRESS WINTER HAVEN FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE PURCELL, JON M. NAME 3.2 NAME 5905 N.W. 54TH TERRACE STREET ADDRESS 3.3 STREET ADDRESS GAINESVILLE FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Addition TITLE 41 TITLE STRANG, CARL J., JR. 4. 2 NAME NAME 1050 W. LAKE OTIS 4.3 STREET ADDRESS STREET ADDRESS WINTER HAVEN FL CITY - ST - ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP

14. Thereby 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 supplementationnual 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 regular 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 ph as parachment with an address.

SIGNATURE: