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FILED PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT May 06 1998 8:00am Secretary of State DIVISION OF CORPORATIONS 1998 Secretary of State DOCUMENT # M84410 (3) WILLIAM A. GLOVER & ASSOCIATES, INC. Principal Place of Business Mailing Address 2830 COUNTRYSIDE #221 2830 COUNTRYSIDE #221 CLEARWATER FL 34621 CLEARWATER FL 34621 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/07/1988 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2894001 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country Zip 8. This corporation owes or has paid the current year intangible Yes Yes 24 25 29 Personal Property Tax due June 30. g, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent GLOVER, WILLIAM A. 2830 COUNTRYSIDE #221 82 Street Address (P.O. Box Number is Not Acceptable) **CLEARWATER FL 34621** 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. I am lamitariwith, an 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 lamitariwith, an 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 lamitari with a provision of Section 607,0505, Florida Statutes. TIOVER when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. DELETE PST Change Addition TITLE 11 TOLE GLOVER, WILLIAM A. NAME 1.2 NAME 2830 COUNTRYSIDE #221 STREET ADDRESS 1.3 STREET ADDRESS **CLEARWATER FL 34621** CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE DELETE 21 TITLE Change Addition NAMF GLOVER, WILLIAM A. 2.2 NAME 2830 COUNTRYSIDE #221 2.3 STREET ADDRESS STREET ADDRESS **CLEARWATER FL 34621** 2 4 CITY-ST-7IP CITY-ST-7IP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition 4.1 TITLE TITLE 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS City-St-ZiP 4.4 CITY-ST-ZIP □ DELETE Change ___ Addition TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS **53 STREET ADDRESS** CITY-ST-ZIP 54 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 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 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 corp ratio for the receiver a 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 changing to on an attention with an address.