FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
1995 MAY -1 PM 1:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N32876 (7)

1. Corporation Name
HICKORY POINT 55'S, INC.

700001478677
-05/08/95--01042--012
****130.00 ****130.00
DO NOT WRITE IN THIS SPACE

Principal Place of Business / Mailing Address
1181 ANCLOTE ROAD
LOT #5
TARPON SPRINGS, FL 34689

3. Date Incorporated or Qualified: 6-20-89
3a. Date of Last Report: 4-18-1994
4. FEI Number: 59-3139306 — Applied For / Not Applicable
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ — $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under § 199.032 Florida Statutes ☐ Yes ☑ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / County 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent
DANSEREAU, HELEN
1181 ANCLOTE RD #20A
TARPON SPRINGS, FL 34689

10. Name and Address of New Registered Agent
81 Name: ALEXANDER FLEMING
82 Street Address (P.O. Box Number is Not Acceptable): 1181 ANCLOTE RD #5
83
84 City: TARPON SPRINGS FL 85 Zip Code: 34689

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: ALEXANDER FLEMING — Alexander Fleming — April 21, 1995
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P DANSEREAU, HELEN 1181 ANCLOTE RD #20A TARPON SPRINGS, FL	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	P ALEXANDER FLEMING 1181 ANCLOTE RD #5 34689 TARPON SPGS, FL ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S WESTERN MARGO 1181 ANCLOTE RD #7 TARPON SPGS, FL	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	S WESTERN, RAYMOND 1181 ANCLOTE RD #7 TARPON SPGS, FL 34689 ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V BRYANT JUNE 1181 ANCLOTE RD TARPON SPGS FL	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP	V GRANADE, WALTER 1181 ANCLOTE RD #20A TARPON SPGS, FL ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T FLEMING BETTY 1181 ANCLOTE RD #5 TARPON SPGS FL	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SPINES JAMES 1181 ANCLOTE RD #2L TARPON SPGS, FL	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP	D BIRT MICHELE 1181 ANCLOTE RD #28 TARPON SPGS, FL ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DOHERTY, ALFRED 1181 ANCLOTE RD #32 TARPON SPGS FL	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP	TAW 5-1-95 ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Alexander Fleming — APRIL 21, 1995 — 813-934-0282
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
ALEXANDER FLEMING