FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N96000004419 (5)

RED & WHITE, INC.

Principal Place of Business Mailing Address 233 W PARK AVE 233 W PARK AVE WINTER PARK FL 32789 WINTER PARK FL 32789-4343 3. Date Incorporated or Qualified 3a. Date of Last Report 08/22/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For EIN 59-3406063 26 Not Applicable Suite. Apt. #. etc. Suite, Apt. #, etc. \$8.75 Additional X 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 Zip Country 8. This corporation has liability for intangible tax under s. 199.032, ☐ Yes ☐ No 24 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name 81 GRAHAM, JESSE E JR 82 Street Address (P.O. Box Number is Not Acceptable) 369 NEW YORK AVE 83 WINTER PARK FL 32789 City Zip Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, 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. TITLE ___ DELETE 1.1 TITLE Change Addition NAME MAYCUMBER, ALLYN 12 NAME 233 PARK AVE STREET ADDRESS 1.3 STREET ADDRESS WINTER PARK FL 32789 CITY - ST - ZIP 1.4 City - ST- ZIP □ DELETE Change Addition TITLE 2.1 TITLE NAME GRAHAM, JESSE E JR 22 NAME STREET ADDRESS 369 N NEW YORK AVE 2.3 STREET ADDRESS WINTER PARK FL 32789 CITY - ST - ZIP 2.4 CITY - ST - ZIP DELETE TITLE 3.1 TITLE Change Addition Gina Garcia NAME 32 NAME 601 N. New York Ave. STREET ADDRESS 3.3 STREET ADDRESS Winter Park, Fl 32789 CITY - ST - ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE Addition Change TITLE NAME 4.2 NAME STREET ADDRESS 43 STREET ADDRESS 4.4 City - ST - ZIP CITY-ST-ZIP DELETE TITLE 51 TITLE Change Addition 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP DELETE 600005086408 61 TITLE Addition TITLE NAME 6.2 NAME -02/13/97--01015--051 **6.3 STREET ADDRESS** STREET ADDRESS ***70.00

6.4 CITY - ST - ZIP

SIGNATURE: <

76 OH FID

14. I do 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 received 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.

FILED

Feb 07 1997 8:00am

Secretary of State

(96/6)