

FILE NOW: FILING FEE IS \$61.25

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May 06 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N97000005712 (1)**

1. Corporation Name

EARTH'S EXOTIC ANIMALS, INC.



Principal Place of Business 3804 71 STREET EAST PALMETTO FL 34221		Mailing Address 3804 71 STREET EAST PALMETTO FL 34221		3. Date Incorporated or Qualified 10/08/1997	
				4. FEI Number 65-0791434	
				Applied For <input type="checkbox"/> Not Applicable	
2. Principal Place of Business 21 3509 Highland Ave W Suite, Apt. #, etc.		2a. Mailing Address 26 P.O. Box 206 Suite, Apt. #, etc.		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
22 City & State 23 Bradenton, FL		27 City & State 28 Palmetto, FL		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24 Zip 34205 25 Country USA		29 Zip 34220 30 Country USA		7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
9. Name and Address of Current Registered Agent FRANZ, TIMOTHY J 3804 71 STREET EAST PALMETTO FL 34221		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
		10. Name and Address of New Registered Agent			
		81 Name Franz, Timothy J			
		82 Street Address (P.O. Box Number is Not Acceptable) 3509 Highland Ave W			
		83			
		84 City Bradenton 85 Zip Code FL 34205			

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 _____ (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	D FRANZ, TIMOTHY J 3804 71 STREET EAST PALMETTO FL 34221 <input type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	P/D Franz, Timothy J 3509 Highland Ave W Bradenton FL 34205 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MISKANICK, MIKE 3804 71 STREET EAST PALMETTO FL 34221 <input type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	VP/D Miskanick, Mike 3509 Highland Ave W Bradenton, FL 34205 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FRANZ, JOHN R 6039 11 ST CT EAST BRADENTON FL 34203 <input checked="" type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	VP/D Zito, Mike 110 Old Hillsborough Ave. E Safner, FL 33584 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	S/T/D Glisson, Amber 110 Old Hillsborough Ave. E Safner, FL 33584 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I 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 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: **Timothy J. Franz** 4/22/98 941-727-4497

CP2E037 (10/97)