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

CARLSON, RUGGLES B

155 E 21ST ST

JACKSONVILLE FL

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

**FILED** Jan 20 1998 8:00am PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # P19507 (3) FRP DEVELOPMENT CORP. Principal Place of Business Mailing Address 34 LOVETON CENTER C/O DENNIS D. FRICK 34 LOVETON CIR STE 100 P.O. BOX 4667 SPARKS MD 21152 JACKSONVILLE FL 32201 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/03/1988 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 58-1794556 Not Applicable 21 26 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 Zip Country 8. This corporation owes or has paid the current year Intangible X Yos □ No 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name 81 FRICK, DENNIS 155 EAST 21ST STREET 82 Street Address (P.O. Box Number is Not Acceptable) JACKSONVILLE FL 32206 83 84 City 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, 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** Signature, typed or printed name of registered agent and title if applicable (NOTE: Rogistered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. □ DELFTE ☐ Change ☐ Addition TITLE 1.1 TITLE ANDERSON, JOHN E. 1.2 NAME NAME 155 E. 21ST ST. STREET ADDRESS 1.3 STREET ADDRESS JACKSONVILLE FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DР DELETE Addition Change TITLE 211IILE DEVILLIERS, DAVID H. JR. 22 NAME 34 LOVETON CIR STE 100 STREET ADDRESS 23 STREET ADDRESS SPARKS MD CITY-ST-ZIP 2 4 CITY-ST-ZIP SD DELFTE Change Addition 3.1 TITLE TITLE FRICK, DENNIS D NAME 3.2 NAME 155 E. 21ST ST. 3.3 STREET ADDRESS STREET ADDRESS JACKSONVILLE FL CITY-ST-ZIP 34. CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE RAYBURN, GEORGE THOMAS 4. 2 NAME NAME 34 LOVETON CIR STE 100 STREET ADDRESS 4.3 STREET ADDRESS SPARKS MD CITY-ST-ZIP 4.4 CITY - ST - ZIP X DELETE Change Addition A 5.1 THEF TITLE Vice President

CITY-ST-ZIP 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 eath; that I am an officer or director of the corporation or the receiver or trueted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapted or on an attachustrativity in address.

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

5.4 CITY - ST - ZIP

James Jeffrey Gilstrap

Change

Addition

155 East 21st Street

Jacksonville, FL

(904)355-178101-09-98