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

May 12 1998 8:00am PROFIT FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (5) R.A. JONES & CO. INC. Principal Place of Business Mailing Address 2701 CRESCENT SPRINGS ROAD 2701 CRESCENT SPRINGS ROAD COVINGTON KY 41017 COVINGTON KY 41017 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/02/1990 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 61-0240920 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 П Trust Fund Contribution Added to Fees 23 28 Zip Country Country Zip This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) **PLANTATION FL 33324** 83 64 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 little if applicable (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS DELETE 1.1 TITLE Change Addition TITLE MOTCH, ARTHUR E. 1.2 NAME NAME 2701 CRESCENT SPRINGS RD 1.3 STREET ADORESS STREET ADDRESS COVINGTON KY CITY-ST-ZIP 1.4 CITY-ST-ZIP Change DELETE CEOD 21 TITLE Addition OLSON, RALPH J 22 NAME 2701 CRESCENT SPRINGS RD STREET ADDRESS 2.3 STREET ADDRESS **COVINGTON KY** CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE COLLINS, JOHN C 3.2 NAME NAME 2701 CRESCENT SPRGS RD 3.3 STREET ADDRESS STREET ADDRESS **COVINGTON KY** CITY-ST-ZIP 3.4. CITY-ST-ZIP Addition DELETE Change TITLE 4.1 TITLE THOMAS, GEORGE L. 4 2 NAME NAME 2701 CRESCENT SPRINGS RD 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP COVINGTON, KY 41017 Change DELETE TITLE 5.1 TITLE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 61 TITLE NAME 6.2 NAME STREET ADORESS **63 STREET ADDRESS**

6.4 CITY-ST-ZIP

14. 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 suppliement, 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 comporation or the receiver or 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 or on a attachment with an address.

CITY-ST-ZIP

FILED