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

CICMATIBE.

## Mar 25 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # (8)P35581 OPTIMUM ENERGY SOURCES, INC. Principal Place of Business Mailing Address 745 HEMBREE PLACE 745 HEMBREE PLACE **ROSWELL GA 30076** ROSWELL GA 30076 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/19/1991 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 58-**19**28718 21 26 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 23 Trust Fund Contribution Added to Fees 28 Country Žip Zip Country 8. This corporation owes or has paid the current year Intangible 24 29 30 Personal Property Tax due June 30. Yes 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 MONROE, JOHN 816 INDIGO COURT Street Address (P.O. Box Number is Not Acceptable) PORT ORANGE FL 32119 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 607.0508, Florida Statutes Signature: Typed or priction name of registered agout and title if applicable (NOTE Registered Agent signature required when reinstating) CR2E034 (10/97) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition 1.1 TITLE TITLE LATHAM, DEBORAH L NAME 1.2 NAME 9025 RIVER RUN RD STREET ADDRESS 1.3 STREET ADDRESS ATLANTA GA CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition **VPD** 2.1 TITLE TITLE FANNING, LEO NAME 2.2 NAME **530 OAKMONT HILL** STREET ADDRESS 23 STREET ADDRESS **DULUTH GA** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE MCKINNEY, KAREN L. NAME 3.2 NAME 1865 GROUSE COURT STREET ADDRESS 3.3 STREET ADDRESS LAWRENCEVILLE GA CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 4 1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS **53 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY - ST - ZIP Change DELETE ☐ Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-2(P 14. Thereby 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 supplience that 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

**FILED** 

2/14/08