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

FILED Mar 12 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 # P9200005093 (9) CORDOVA VENTURES, INC. Principal Place of Business Mailing Address 316 S. BAYLEN ST. BOX 100 316 S. BAYLEN ST. BOX 100 PENSACOLA FL 32501 PENSACOLA FL 32501 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/12/1992 2. Principal Place of Busines 2a. Mailing Address 4. FEI Number Applied For 2200 ViA 2200 Via 59-3151624 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name LEVIN, ALLEN R. 316 S. BAYLEN ST, BOX 100 Street Address (P.O. Box Number is Not Acceptable PENSACOLA FL 32501 63 PENSACULA Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered change was authorized by the corporation's board of directors. I hereby accept the appointment as registered 607 0505, Florida Statutes. 11. Pursuant to the provisions of office or registered agent, or agent. I am familiar with, an Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE 1.1 TITLE TITLE BRANNEN, DAVID NAME 1.2 NAME 316 S. BAYLEN ST. BOX 100 STREET ADDRESS 1.3 STREET ADDRESS PENSACOLA FL 1.4 CITY - ST- ZIP CITY-ST-ZIP DELETE 2.1 TITLE TITLE LEVIN, ALLEN R. NAME 2.2 NAME 316 S. BAYLEN ST. BOX 100 STREET ADDRESS 2.3 STREET ADDRESS PENSACOLA FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST- ZIP 34. CITY-ST-ZIP DELETE 4.1 TITLE Change Addition TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP City-ST-21P DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME

14. Thereby certify that the information supplied indicated on this annual report or supplied officer or director of the corporation or his Block 12 or Block 13 if changed, or or an all oes not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information I is true and accurate and that my signature shall have the same legal effect as If made under oath; that I am an episoworod to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

DELETE

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

812418-5850

Change

Addition