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CORPORATION **ANNUAL REPORT**

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SIGNATURES



FLORIDA DEPARTMENT OF STATE

FILED

Apr 13 1998 8:00am

Secretary of State

4/6/98 812-SQL-3498

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000021534 (1) F. J. LYNCH COMPANY Principal Place of Business Mailing Address 28 DOLPHIN DRIVE 28 DOLPHIN DRIVE TREASURE ISLAND FL 33706 TREASURE ISLAND FL 33706 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/23/1993 2. Principal Place of Business 28. Mailing Address 4, FEI Number Applied For 21 59-3179416 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution 28 Added to Fees Zip Zip Country This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name LYNCH, FRANK J 20064 GULF BLVD 82 Street Address (P.O. Box Number is Not Acceptable) INDIAN SHORES FL 33785 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: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. DELETE TITLE 1 1 TITLE LYNCH, FRANK J 1.2 NAME NAME 20064 GULF BLVD STREET ADDRESS 1.3 STREET ADDRESS INDIAN SHORES FL 33785 CFTY-ST-ZIP 1.4 CITY - ST - ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 CR2E034 (10/97 Change Addition DELETE Change Addition 2.1 TITLE TITLE LYNCH, PAULETTE NAME 2.2 NAME 20064 GULF BLVD STREET ADDRESS 2.3 STREET ADDRESS **INDIAN SHORES FL 33785** CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 5 I TITLE TITLE MAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Addition 6.1 TITLE TITLE NUF 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP 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 oath; that I am an officer or director of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changer, or after the corporation of the corporation of the corporation of the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changer.

FRANK J. LYNCH