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

Feb 16 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT #**1. Corporation Name P93000024098 (4) TORREY S CREST, INC. Mailing Address Principal Place of Business 3205 CR 664 3205 CR 664 **BOWLING GREEN FL 33834 BOWLING GREEN FL 33834** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/29/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0395243 365 OLD DIXIE HWY. Suite, Apt. #, etc. Not Applicable 21 26 365 OLD DIXIE HWY \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 BOWLING GREEN BOWLING GREEN Zip Country Country 8. This corporation owes or has paid the current year Intangible Yes Yes 25 HARDEE 33834 HARDEE 33834 Personal Property Tax due June 30. 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent SMITH, JOSEPH F Name LEROY SHEPARD 3205 CR 664 O. Box Number is Not Acceptable) **B2 BOWLING GREEN FL 33834** 365 OLD DIXIE HWY. 83 Zip Code 33834 BOWLING GREEN 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement to office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. his statement for the purpose of changing its registered ectors. I hereby accept the appointment as registered LEROY SHEPARD, PRESIDENT (NOTE <u>/21/98</u> SIGNATURE OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OPRICERS AND DIRECTORS IN 12 13. DELETE 11 TILL ☐ Addition Change TITLE SMITH, JOSEPH F 1.2 NAME NAME DELETE 3205 CR 664 STREET ADDRESS 1.3 STREET ADDRESS **BOWLING GREEN FL** 1.4 CITY - ST - ZIP CITY-ST-ZIP Change DELETE Addition TITLE 2.1 TITLE D/P SHEPARD, LEROY NAME 2.2 NAME 365 OLD DIXIE HWY STREET ADDRESS 2.3 STREET ADDRESS **BOWLING GREEN FL** CITY-ST-ZIP 2.4 CITY-ST-ZIF DELCTE 3.1 TITLE Change Addition V/S NAME 32 NAME DELILIA SHEPARD 3.3 STREET ADDRESS STREET ADDRESS 365 OLD DIXIE HWY. CITY-ST-ZIP 3.4. CITY-ST-ZIP BOWLING GREEN, FL ☐ Addition DELETE 4.1 TITLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS City - ST - ZIP 44 CITY-ST-ZIP DELETE 51 TITLE Change Addition TITLE NAME 52 NAME STREET ADDRESS **5.3 STREET ADDRESS** 5.4 CITY - ST - ZIP CITY - ST - ZIP DELETE Change Addition 6.1 TITLE TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS**

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 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 an attractment with an address

SIGNATURE:

Lever Sheno 1-21-98

FILED