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

NAME

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

FILED Feb 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 # P93000042284 (8) FRANKLIN'S BAYMEADOWS, INC. Principal Place of Business Mailing Address 7680-1 PHILLIPS HIGHWAY 7660-1 PHILLIPS HIGHWAY JACKSONVILLE FL 32256 JACKSONVILLE FL 32256 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/01/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 59-259/620 Applied For APPLIED FOR 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 \$5.00 May Be 6. Election Campaign Financing П 23 Trust Fund Contribution Added to Fees Country Zip B. This corporation owes or has paid the current year Intangible 24 29 Personal Property Tax due June 30. Yes Yes 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 LANE, EDWARD G 7660-1 PHILLIPS HIGHWAY 82 Street Address (P.O. Box Number is Not Acceptable) JACKSONVILLE FL 32256 83 84 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, 1 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title d applicable (NOTE: Registered Agent alguature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition TITLE 1.1 TITLE LANE, EDWARD NAME 1.2 NAME 312 EDINBURGH LANE 1.3 STREET ADDRESS STREET ADDRESS ORANGE PARK FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 2.1 TITLE Change Addition TITLE LANE, BARBARA 2.2 NAME NAME 312 EDINBURGH LANE STREET ADDRESS 2.3 STREET ADDRESS ORANGE PARK FL CITY-ST-ZIP 2.4 CITY-ST-2IP DELETE Change Addition 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 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition ☐ Change TITLE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 61 TITLE

> 62 NAME 6.3 STREET ADDRESS

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 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

6.4 CITY-ST-ZIP

EDWARD LANE

2/4/98 904-733-1867