UPDATED ANNUAL REPORT 1998

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May 26 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000066561

1. Corporation Name

G.N.P., Inc.

Principal Place of Business | Mailing Address

Amendment
DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/24/1993

2. Principal Place of Business
21 5960 W. Jones Ave.
Suite, Apt. #, etc.
22
City & State
23 Zellwood, FL
Zip 24 32796 | Country 25

2a. Mailing Address
26 P.O. Box 1000
Suite, Apt. #, etc.
27
City & State
28 Zellwood, FL
Zip 29 32798 | Country 30 US

4. FEI Number: 59-3213571 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

Laws, Judy

10. Name and Address of New Registered Agent

81 Name: C. Stephen Allen, Esq.
82 Street Address (P.O. Box Number is Not Acceptable): Suite 335
83 4830 W. Kennedy Blvd.
84 City: Tampa FL 85 Zip Code: 33609

11. Pursuant to the provisions of Section(s) 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: C. Stephen Allen — April 23, 1998
(Signature of New Registered Agent, if changed) (Print Registered Agent's Name if Changed) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP Hill, Bryson F. Jr.	☒ DELETE	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP: D/P William M. Nease, Jr. 5960 W. Jones Avenue Zellwood, FL 32796 — ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV Gutherie, Hugh L.	☒ DELETE	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP: D/V/S Faith M. Gillooly 1291 Tivoli Dr. Deltona, FL 32725 — ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS Hill, Bryson F. III	☒ DELETE	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP — ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP — ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP — ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP — ☐ Change ☐ Addition

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PE 5.26

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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 report or supplemental 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.

SIGNATURE: W. M. Nease — Apr. 23, 1998 (407) 814-1950
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — Area Code & Daytime Telephone Number