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

Mailing Address

UNIT 7 7 8 B

2a. Mailing Address

City & State

32904

26

27

28

9105 ELLIS ROAD

MELBOURNE FL 32904

315 Stan Drive

Melbourne, FL

Suite, Apt #, etc. Units 8 & 9

CORPORATION ANNUAL REPORT

1998

Principal Place of Business

MELBOURNE FL 32904

2. Principal Place of Business

Suite Apt. #, etc 8& 9

315 Stan Drive

Melbourne, FL

WINDISCH, ROBERT C

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g, Name and Address of Current Registered Agent

9105 ELLIS ROAD

UNIT 7 & 88

City & State

^{Zip}32904

21

22

23

NAME

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000073890 (4)

ROBERT C. WINDISCH, INC.

2220 S. PENNWOOD DR. Street Address (P.O. Box Number is Not Acceptable)
450 Harwood Ave. **MELBOURNE FL 32901** 83 85 Zig 2937 Satellite Beach 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS DELETE Change Addition TITLE 1.1 TITLE WINDISCH, ROBERT C NAME 1.2 NAME 450 Harwood Ave. 2220 S. PENNWOOD DR. STREET ADDRESS 1.3 STREET ADDRESS Satellite Beach, FL. 32937 MELBOURNE FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2. 4 CITY - ST - ZIP 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 4.1 TITLE Change Addition TITLE NAME 4. 2 NAME STREET ADDRESS 4 3 STREET ADDRESS CITY - ST - ZIP 44 CITY-ST-ZIP DELETE Change Addition TITLE 51 TITLE NAME 5.2 NAME 53 STREET ADDRESS STREET ADDRESS CITY-S1-ZIP 54 CITY-ST-ZIP

6 1 TITLE

6.2 NAME

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

Country USA

Name

30

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 enrural 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 13 ichanged or sprain attachment with an address. SIGNATURE:

DELETE

FILED

Apr 24 1998 8:00am Secretary of State

3. Date incorporated or Qualified 10/26/1993

65-0439269

6. Certificate of Status Desired

6. Election Campaign Financing

Personal Property Tax due June 30.

10. Name and Address of New Registered Agent

Trust Fund Contribution

4. FEI Number

Yes

☐ Change

Addition .

8. This corporation owes or has paid the current year Intangible

DO NOT WRITE IN THIS SPACE Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

□ No

Not Applicable