FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE
Sandra Mortham
Secretary of State
Division of Corporations

APPROVED AND FILED

95 MAY -1 AM 8:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000085237 (4)

1. Corporate Name

LITTLE ORANGE BASKET, INC.

Principal Place of Business	Mailing Address
1465 SOUTH FORT HARRISON AVENUE SUITE 201 CLEARWATER FL 34616	1465 SOUTH FORT HARRISON AVENUE SUITE 201 CLEARWATER FL 34616

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/14/1993

3a. Date of Last Report: 07/22/1994

2. Principal Street Address 21 1472 Jordan Hills Court	2a. Mailing Address 26 1472 Jordan Hills Court	4. FEI Number: 59-3214057 ☐ Applied For ☐ Not Applicable
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
City & State 23 Clearwater, Florida	City & State 28 Clearwater, Florida	6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
Zip 24 34616 County 25 Pinellas	Zip 29 34616 County 30 Pinellas	8. This corporation is subject to the provisions of Florida Statutes ☑ Yes ☐ No

9. Name and Address of Current Registered Agent

BRUNSON, JOHN M
1465 S. FORT HARRISON AVE.
SUITE 201
CLEARWATER FL 34616

10. Name and Address of New Registered Agent

01 Name: Brunson, John Morgan

02 Street Address (P.O. Box Number is Not Acceptable)

03 1474 Jordan Hills Court

04 City: Clearwater, FL 05 Zip Code: 34616

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: John Morgan Brunson 4/27/95
(Signature of new registered agent, if changing) (Date)

12. OFFICERS AND/OR DIRECTORS	13. ADDITIONS, CHANGES TO OFFICERS AND/OR DIRECTORS
1 TITLE: PD 1 NAME: LENHARDT, PETER M. 1 STREET ADDRESS: 1465 SOUTH FORT HARRISON AVENUE, SUITE 201 1 CITY-ST-ZIP: CLEARWATER FL	1 TITLE: PD ☐ Change ☐ Addition 1 NAME: LENHARDT, PETER M 1 STREET ADDRESS: 1472 Jordan Hills Court 1 CITY-ST-ZIP: Clearwater, FL 34616
2 TITLE: SD 2 NAME: LENHARDT, HELEN K. 2 STREET ADDRESS: 1465 SOUTH FORT HARRISON AVENUE, SUITE 201 2 CITY-ST-ZIP: CLEARWATER FL	2 TITLE: SD ☐ Change ☐ Addition 2 NAME: LENHARDT, HELEN K 2 STREET ADDRESS: 1472 Jordan Hills Court 2 CITY-ST-ZIP: Clearwater, FL 34616
3 TITLE: 3 NAME: 3 STREET ADDRESS: 3 CITY-ST-ZIP:	3 TITLE: ☐ Change ☐ Addition 3 NAME: 3 STREET ADDRESS: 3 CITY-ST-ZIP:
4 TITLE: 4 NAME: 4 STREET ADDRESS: 4 CITY-ST-ZIP:	4 TITLE: ☐ Change ☐ Addition 4 NAME: 4 STREET ADDRESS: 4 CITY-ST-ZIP:
5 TITLE: 5 NAME: 5 STREET ADDRESS: 5 CITY-ST-ZIP:	5 TITLE: ☐ Change ☐ Addition 5 NAME: 5 STREET ADDRESS: 5 CITY-ST-ZIP:
6 TITLE: 6 NAME: 6 STREET ADDRESS: 6 CITY-ST-ZIP:	6 TITLE: ☐ Change ☐ Addition 6 NAME: 6 STREET ADDRESS: 6 CITY-ST-ZIP:

14. I do hereby certify that the information supplied with this filing is accurately furnished and 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 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 with an asterisk (*) or attached with an explanation.

SIGNATURE: Peter M. Lenhardt Peter M. Lenhardt 4/27/95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date)

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