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PROFIT CORPORATION ANNUAL REPORT

1998

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400059089 (0)

ALLIANCE PERFORMANCE CO. OF ORANGE

Principal Place of Business Mailing Address 3145 W. ORANGE COUNTRY CLUB DR. 3145 W. ORANGE COUNTRY CLUB DR. WINTER GARDEN FL 34787 WINTER GARDEN FL 34787

FILED Apr 09 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/08/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3260582 21 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Country Zip Country 8. This corporation owes or has paid the current year Intangible Yes_ 24 29 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent В1 Name BAKER, LYMAN R 3145 W. ORANGE COUNTRY CLUB DR. Street Address (P.O. Box Number is Not Acceptable) 82 WINTER GARDEN FL 34787 83 84 City 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) CR2E034 (10/97 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Addition Change TITLE 11 TITLE BAKER, LYMAN R NAME 1.2 NAME 3145 W. ORANGE COUNTRY CLUB DR. STREET ADDRESS 1.3 STREET ADDRESS WINTER GARDEN FL 34787 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Addition TITLE 2.1 TITLE BAKER, JUDITH E NAME 2.2 NAME 3145 W. ORANGE COUNTRY CLUB DR. 2.3 STREET ADDRESS STREET ADDRESS WINTER GARDEN FL 34787 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 TITLE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 61 TITLE MALK 62 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP

filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information report is true and rigurate and that my signature shall have the same legal effect as if made under oath; that I am an truttoe employeeren to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in with anyaddless. 14. Thereby certify that the information cup blied with this filling does not qualify indicated on this annual report or supplemental annual report is the and officer or director of the corporation of the receiver of truttee implement Block 12 or Block 13 if changed, on an attachment with any address.

SIGNATURE:

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