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

PROFIT CORPORATION annual report

1997

KOSICK, DONALD K

2005 A1A HWY NO.

INDIALANTIC FL 32903



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9500007049 (6)

9. Name and Address of Current Registered Agent

DON KOSICK INC.

Principal Place of Business

2006 ATA HWY NO. 2475 JEN DRIVE INDIALANTIC FL 32903-2514 SUITE 29 MELBOURNE FL 32940 3. Date Incorporated or Qualified 3a, Date of Last Report 01/26/1995 03/29/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 65-0551619 200s HWY AIA N 2005 HWY AIA N Suite, Apt. #, etc. Suite, Apt. #. øtc 5. Certificate of Status Desired 27 City & State City & State 6. Election Campaign Financing INDIALANTIC, PL & **JUDIALAUTIC** Trust Fund Contribution 28 Country Country This corporation has liability for intangible tax under s. 199.032, 32903 30 United States 25 United States 29 Yes No

Mailing Address

City 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

81 Name

82

83

SIGNATURE Signature Type dior printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)12. OFFICERS AND DIRECTORS 13. DELETE 1.1 TITLE Change Addition TITLE KOSICK, DON 1.2 NAME NAME 2005 A1A HWY. NO. STREET ADDRESS 1.3 STREET ADDRESS INDIALANTIC FL 32903 1.4 CITY-ST-ZIP 0/17 - S1 - 7/P Change DELETE Addition 100,6 21 TITLE Charles Button is no longer **BUTTON, CHUCK** NAME 22 NAME member of this organization 3115 S. A1A STREET ADDRESS 23 STREET ADDRESS SO. MELBOURNE FL 32951 2. 4 CITY-ST-ZIP CHY-ST-7P Change DELETE Addition TITLE 3.1 TITLE NAMi 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - ST - ZIF CHY-ST 201 DELETE Change Addition 4.1 TITLE TITLE NAME 4.2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP C:TY - ST - ZiP DELETE Change Addition 5.1 TITLE THEE 52 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST ZIP DELETE Change Addition 6.1 TITLE TIFE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST-ZIP City - St - ZIP

14. I do hereby cert by 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.

SIGNATURE:

FILED

Apr 23 1997 8:00am

Secretary of State

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

CR2E034

Florida Statutes

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

10. Name and Address of New Registered Agent