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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

NAME

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIE

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000087472 (3)

APEX BUSINESS SERVICES OF LAKELAND, INC.

5172 CAMBRY LANE PO BOX 91141 LAKELAND FL 33805 **LAKELAND FL 33804-141** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/13/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For P.O. BOX 91141 21 Not Applicable 59 337905 Suite, Apt. #, etc. Sulte, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired П Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be LAKELAND 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 1) S A 24 25 Personal Property Tax due June 30 Yes Yes ☐ No g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 BRADLEY, MORGAN D 5172 CAMBRY LANE 82 Street Address (P.O. Box Number is Not Acceptable) LAKELAND FL 33805 83 84 City 85 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. SIGNATURE Signature, typed or pointed name of registered agent and this if applicable (NOTE Registered Agent signature required when reinstaling) DATE 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELET**e** Change TITLE 1.1 1/TLE NAME **BRADLEY, MORGAN D** 1.2 NAME 5172 CAMBRY LANE STREET ADDRESS 1.3 STREET ADDRESS LAKELAND FL 33805 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE Change ☐ Addition **BRADLEY, ALLISON S** NAME 2.2 NAME **5172 CAMBRY LANE** STREET ADDRESS 2.3 STREET ADDRESS LAKELAND FL CITY-ST-ZIP 2. 4 CITY - ST- ZIP DELETE TITLE Change Change Addition 3.1 TITLE NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE Change ___ Addition 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition

5.2 NAME

6 1 TITLE

6.2 NAME

DELET**E**

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY - ST- ZIP

5.4 CITY - ST - ZIP

14. Thereby 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 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 13 if changed and on an attachment with an address.

Change

Addition

FILED

May 01 1998 8:00am

Secretary of State