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

PROFIT CORPORATION ANNUAL REPORT

1998

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000090170 (8)

DOLPHIN BOOK NOOK, INC.

Principal Place of Business Mailing Address 4667 GULF BLVD. 4667 GULF BLVD. SUITE 103 SUITE 103 DO NOT WRITE IN THIS SPACE ST. PETE BEACH FL 33706 ST. PETE BEACH FL 33706 3. Date Incorporated or Qualified 11/28/1995 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 59-3346820 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Ζìp Country This corporation owes or has paid the current year Intangible 24 29 30 Personal Property Tax due June 30. X Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 21 Name CASAVANT, ROBERT V 8115 SOMERSET DR. Street Address (P.O. Box Number is Not Acceptable) **LARGO FL 34643** 83 84 City 85 Zip Code 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) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE ☐ Change Addition 1.1 TITLE TITLE CASAVANT, JANET K NAME 1.2 NAME 8115 SOMERSET DR. STREET ADDRESS 1.3 STREET ADDRESS **LARGO FL 34643** 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE CASAVANT, ROBERT V 2.2 NAME NAME 8115 SOMERSET DR. 2.3 STREET ADDRESS STREET ADORESS LARGO FL 34643 2. 4 CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME

64 CITY-ST-ZIP

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 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.

3.3 STREET ADDRESS

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3.4. CITY - ST-ZIP

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

62 NAME

DELETE

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SIGNATURE Onet K Caravast ETT K. Casavant 1/30/98 (813) 360-0186

CR2E034 (10/97)

Change

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Addition

Addition

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FILED

Feb 05 1998 8:00am

Secretary of State