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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000092687 (9)

PILOCK CORPORATION

FILED Jan 20 1998 8:00am Secretary of State

Principal Place of Business Mailing Address 16784 U.S. HIGHWAY 331 SOUTH **424 TAUNTON ROAD** FREEPORT FL 32439 FREEPORT FL 32439 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/04/1995 2. Principal Place of Business 2a. Mailing Address FFI Number Applied For 21 26 59-3376436 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Country Zip Country Zip This corporation owes or has paid the current year Intangible ☐ Yes 29 Personal Property Tax due June 30. 24 30 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BATES, STAN 16784 U.S. HIGHWAY 331 SOUTH Street Address (P.O. Box Number is Not Acceptable) 62 FREEPORT FL 32439 83 84 City Zip Code 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Fiorida 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 registimed 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 Change Addition TITLE 1.1 TITLE BATES, STAN 1.2 NAME NAME **424 TAUNTON ROAD** STREET ADDRESS 1.3 STREET ADDRESS FREEPORT FL 32439 1.4 CITY - ST- ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE TAUNTON, F.L. NAME 2.2 NAME **424 TAUNTON ROAD** STREET ADDRESS 23 STREET ADDRESS FREEPORT FL 32439 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition 4.1 TITLE TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 44 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 51 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS 64 CITY-ST-ZIP 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 12 or Block 13 if changed, or on an attachment with an address.