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Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000096033 (2)

1. Corporation Name
PENNINGTON DESIGN GROUP, INC.

Principal Place of Business
4298 S.W. XENON STREET
PORT ST. LUCIE FL 34953

Mailing Address
4298 S.W. XENON STREET
PORT ST. LUCIE FL 34953-5642

Change of Address below — change below

2. Principal Place of Business: 21 512 SW Port St Lucie Blvd	2a. Mailing Address: 26 512 SW Port St Lucie Blvd.
Suite, Apt #, etc: 22	Suite, Apt #, etc: 27
City & State: 23 Port St Lucie, FL	City & State: 28 Port St Lucie, FL
Zip: 24 34953 — Country: 25 U.S.	Zip: 29 34953 — Country: 30 U.S.

3. Date Incorporated or Qualified: 01/06/1996
3a. Date of Last Report: None
4. FEI Number: 65-0636763 (Fed. Tax #) — ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☑ No

9. Name and Address of Current Registered Agent
PENNINGTON, TODD A
1407 14TH LANE
PALM BEACH GARDENS FL 33418

10. Name and Address of New Registered Agent
81 Name: Todd A. Pennington
82 Street Address (P.O. Box Number is Not Acceptable): 1400 Village Blvd. #301
83
84 City: West Palm Beach FL 85 Zip Code: 33409

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] DATE: 3/20/97
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P — President	☑ DELETE	1.1 TITLE	P — President	☑ Change ☐ Addition
NAME	James Geldart		1.2 NAME	Todd Pennington	
STREET ADDRESS	1100 Moffit St.		1.3 STREET ADDRESS	512 SW Port St Lucie Blvd.	
CITY-ST-ZIP	Hallandale, FL		1.4 CITY-ST-ZIP	Port St Lucie, FL 34953	
TITLE	V — Vice-President	☑ DELETE	2.1 TITLE	V — Vice president	☑ Change ☐ Addition
NAME	Todd Pennington		2.2 NAME	Brent Pennington	
STREET ADDRESS	1407 14th Lane		2.3 STREET ADDRESS	512 SW Port St Lucie Blvd.	
CITY-ST-ZIP	Palm Beach Gardens, FL 33418		2.4 CITY-ST-ZIP	Port St Lucie, FL 34953	
TITLE	S — Secretary	☑ DELETE	3.1 TITLE	S — Secretary	☑ Change ☐ Addition
NAME	James Geldart		3.2 NAME	Albert Pennington	
STREET ADDRESS	1100 Moffit St.		3.3 STREET ADDRESS	512 SW Port St Lucie Blvd	
CITY-ST-ZIP	Hallandale, FL		3.4 CITY-ST-ZIP	Port St Lucie, FL 34953	
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
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
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (9/96)

14. I do 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.

SIGNATURE: [signature] 3/20/97 (561) 336 4353
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0474045