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PROFIT CORPORATION ANNUAL REPORT

1998



ELORIDA DEPARTMENT DE STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9600002187 (8)

SHERROD - HEIST INVESTMENT PROPERTIES. INC.

FILED Apr 27 1998 8:00am Secretary of State

Principal Place of Business Mailing Address 1861 ESTERO BLVD STE 21 1681 ESTERO BLVD STE 21 FORT MYERS BEACH FL 33931 FORT MYERS BEACH FL 33931 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/02/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 NOT APPLICABLE 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Country Zιρ Country This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 24 25 20 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name WEISSE, DAVID R 1661 ESTERO BLVD STE 20 82 Street Address (P.O. Box Number is Not Acceptable) FORT MYERS BEACH FL 33932 83 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. 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 TITLE 1.1 TITLE Change Addition SHERROD, CHRISTINA E NAME 1.2 NAME 1661 ESTERO BLVD STE 20 STREET ADDRESS 1.3 STREET ADDRESS FORT MYERS BEACH FL 33931 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change ☐ Addition TITLE 21 TITLE NAME 22 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change ___ Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Addition Change TITLE 4.1 TITLE NAME 4. 2 NAME

CITY-ST-ZIP 6.4 CITY-ST-ZIP 14. Thereby certify that the information supplied with this filling 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 praphied, or on an attachment/with an address.

4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME 5.3 STREET ADDRESS

6.1 TITLE 6.2 NAME

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

SIGNATURE

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

DELETE

DELETE

941-463-1894

Change

Chance

Addition

Addition