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

PROFIT CORPORATION ANNUAL REPORT

1998



LUORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P96000013880 (5) DOCUMENT #

PETER A. GREGORY ASSOCIATES, INC.

Principal Place of Business Mailing Address 1291 GRAND ISLE COURT 1291 GRAND ISLE COURT NAPLES FL 33040 NAPLES FL 33940 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/07/1996 2. Principal Place of Business 2a. Maiting Address Applied For Not Applicable 21 65-0648334 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip 34108 Country Country 8. This corporation owes or has paid the current year Intangible 34108 ☐ Yes 29 30 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name M.C. EACHERN, G. CARSON

Street Address (P.O. Box Number is Not Acceptable)

ROGTZEL & ANDRESS MCEACHERN, G. CARSON 850 PARK SHORE DR., STE. 202 82 NAPLES FL 33940 83 850 PARK SHORE DRIVE 84 Zip Code NAPLOS 34103 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) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change ___ Addition TITLE Ď 1.1 TITLE PLESIDENT GREGORY. NAME **GREGORY. PETER A** 1.2 NAME HETER A 3718 RACHEL LN. 1291 GRAND ISLE COURT STREET ADDRESS 1.3 STREET ADDRESS 34108 NAPLES FL 33940 NAPLES CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change ☐ Addition TITLE 31 TITLE

6.4 CITY - ST - ZIP 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.

3.2 NAME

4.1 TITLE

4.2 NAME 4.3 STREET ADDRESS

5.1 TITLE

5.2 NAME

6.1 TITLE 6.2 NAME

4.4 CITY - ST - ZIP

5.3 STREET ADDRESS

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3.3 STREET ADDRESS 3.4. CITY - ST- ZIP

NAME

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NAME STREET ADDRESS

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CITY-ST-ZIP

CITY-ST-ZIP

STREET ADORESS

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FILED

May 27 1998 8:00am

Secretary of State