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

PROFIT CORPORATION ANNUAL REPORT

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1**9**98 DOCUMENT # 1. Corporation Name P96000032378 (7)

THE VANGUARD GROUP INC.

Principal Place of Business Mailing Address 4800 OLD INDIAN TOWN RD P O BOX 8064 JUPITER FL 33458 JUPITER FL 33468 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/09/1996 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 Not Applicable 65-0742778 Suite, Apt. #, etc. Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Country Zio Zip Country 8. This corporation owes or has paid the current year Intangible Yes Personal Property Tax due June 30. 24 30 25 29 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 CULPEPPER, JOHN R 4800 OLD INDIAN TOWN RD 82 Street Address (P.O. Box Number is Not Acceptable) Jupit**ér** FL 33458 83 84 City 85 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** (NOTL: Registered Agent signature required when reinstating) Signature, typed or printed nanie of registered agent and site if applicable OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Addition Change TITLE DELETE 1.1 TITLE Secretary NAME **CULPEPPER**, JOHN R 1.2 NAME CR2E034 Pamela Culpepper 4800 OLD INDIAN TOWN RD 1.3 STREET ADDRESS STREET ADDRESS P.O. Box 8064 jupiter fl 33458 1.4 CHY-ST-ZIP CITY-ST-ZIP Jupiter F1 33468 >4800 Old Indian town 22 Change DELETE Addition TITLE 2.1 TITLE 22 NAME NAME Jupiter 91 33458 STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - 2IP DELETE Change Addition 3.1 TITLE TITLE NAME 3.2 NAME 3.3 STREET ADORESS STREET ADDRESS 3.4 CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition 5 1 TITLE TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 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.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

DFLETE

4/20/20 CHEHL 9975

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***150.00

Change

Addition

FILED

Jul 09 1998 8:00am

Secretary of State