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CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000033301 (8)

MALLARD POND, INC. Principal Place of Business Mailing Address 1300 METROPOLITAN BLVD. 1300 METROPOLITAN BLVD. TALLAHASSEE FL 32308 TALLAHASSEE FL 32308 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/17/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3376502 Not Applicable 21 Suite, Apt. #, otc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zιρ Country Country 8. This corporation owes or has paid the current year Intangible ☐ No 30 Personal Property Tax due June 30. Yes 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 61 Name NOBLIN, MILLARO J 1300 METROPOLITAN BLVD. 82 Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL 32308 83 84 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 egent, 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. Millard J. Noblin SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. TITLE DELETE 11 TITLE Change Addition Noblin, Millard J NAME 1.2 NAME 2810 CLINE ST. 3180 Hawks Landing Drive 1.3 STREET ADDRESS STREET ADDRESS TALLAHASSEE FL 32312 Tallahassee, Florida 32308 1.4 CITY-ST-7IP CITY - ST - ZIP DELETE Change Addition TITLE 21 TITLE PROCTOR, W. THEO JR. NAME 2.2 NAME 1320 PIEDMONT DR. STREET ADDRESS 2.3 STREET ADDRESS TALLAHASSEE FL 32312 CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE HARBIN, CASSANDRA G NAME 3.2 NAME 3408 TREATY OAK STREET ADORESS 3.3 STREET ADDRESS TALLAHASSEE FL 32312 3.4. CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE 4, 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP Addition DELETE Change 61 TITLE TITLE

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 of 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 of one affecting 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 of the receiver of the

6.2 NAME 6.3 STREET ADDRESS

SIGNATURE:

NAME

STREET ADDRESS CITY-ST-ZIP

Nowin President, Director

4/13/98

FILED

Apr 16 1998 8:00am

Secretary of State