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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

P96000036769 (3)

WEBTIVITIES, INC.

Principal Place of Business

Mailing Address

FILED Mar 11 1998 8:00am Secretary of State



807 F SOUTH ORLANDO AVENUE WINTER PARK FL 32789		807 F SOUTH ORLANDO AV WINTER PARK FL 32789	/ENUE	DO NOT MIDITE IN THE O	D4.0F	
	•			DO NOT WRITE IN THIS S 3. Date Incorporated or Qualified	AACE	
				04/24/1996		
2. Principal P	lace of Business	2a, Mailing Address		4. FEI Number	Applied For	
21 1470	Minnesota Av	e 26 1470 Minne	Sota AV	65-0702740	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State 23 Winそ	Park FL	28 Winter Pa		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
24 32.79		29 32789 3	Country		Yes No	
Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent		
MURASKO, JOSEPH M						
7125 U.S. HWY. 17-92				Address (P.O. Box Number is Not Acceptable)		
rer	IN PARK FL 32730		83			
			84 City	FL	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						
	Signature, typed or printed name of registricid ago			required when reinstating) DATE		
12. TITLE	OFFICERS AN	D DIRECTORS DELETE	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AND I	Change Addition	
NAME	CROWNOVER, CAREY		1.2 NAME	Carey D Crownover	Country Carrier 4	
STREET ADORESS	6651 WESTMONTE AVENUE		1.3 STREET ADDRESS	1470 Minnesota AVC		
CITY-ST-ZIP	ORLANDO FL 32835		1.4 CITY - ST - ZIP	Winter Park FL 32	<u> </u>	
TITLE	D	☐ DELETE	2.1 TITLE	D .	Change Addition	
NAME	HARRIS, PRESTON		2.2 NAME	Harris, Picoton		
STREET ADDRESS	312 ALTAMONTE BAY CLUB		2.3 STREET ADDRESS	1470 Minnepota Ave		
CiTY-ST-ZIP	ALTAMONTE SPRINGS FL 32		2. 4 CITY - ST - ZIP	Winter Park 12 32	1789	
TITLE	U SATURAL DALK D	☐ DELETÉ	3.1 TITLE	L	Change Addition	
NAME OTRECT ADDRESS	MELVIN, PAUL D 1228 FOXDEN ROAD		3.2 NAME			
STREET ADORESS CITY-ST-ZIP	APOPKA FL 32712		3.3 STREET ADDRESS		İ	
TITLE	A OTTORTE GETTE	DELETE	3.4. CITY-ST-ZIP		Change Addition	
NAME		_	4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
C(TY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE		Change Addition	
NAME			5.2 NAME			
STREET ADORESS			5.3 STREET ADDRESS			
CITY-ST-ZIP		DELETE	5.4 CITY-ST-ZIP		100	
TITLE		☐ DELET E	6.1 TITLE	L	Change Addition	
NAME CAREET ADDRESS	t 3		6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP	- A	4 1 2 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	6.4 CITY - ST- ZIP	1 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		

4. 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 eport 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 file projector or trusted 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 or an appear with an address.

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3-6-98

(407)628-2001