

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

FILED  
Jul 30 1998 8:00am  
Secretary of State

PROFIT CORPORATION  
ANNUAL REPORT  
1998

FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P 96 0000 38160 (3)  
1. Corporation Name  
PEARSON Properties Inc.

Principal Place of Business  
1415 Pinehurst Rd Ste H  
Dunedin FL 34698

2. Principal Place of Business  
21 1415 Pinehurst Rd  
Suite, Apt. #, etc  
# H  
City & State  
Dunedin  
Zip  
34698 FL  
25 Pinellas  
28  
Country

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
05/02/96

4. FEI Number  
59-3374756  
Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent  
Guy Pearson  
1415 Pinehurst Rd # H  
Dunedin, FL 34698

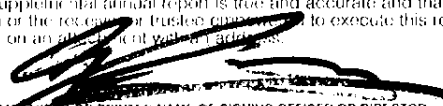
10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City  
85 Zip Code  
FL

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 607.0135, Florida Statutes.

SIGNATURE  
Signature (typed or printed name of registered agent and title, if applicable) (NOTE: Registered Agent's signature required when re-registering) DATE

| 12. OFFICERS AND DIRECTORS |                                 | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |                                                                   |
|----------------------------|---------------------------------|-------------------------------------------------------|-------------------------------------------------------------------|
| TITLE                      | <input type="checkbox"/> DELETE | 11 TITLE                                              | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       |                                 | 12 NAME                                               |                                                                   |
| STREET ADDRESS             |                                 | 13 STREET ADDRESS                                     |                                                                   |
| CITY-ST-ZIP                |                                 | 14 CITY-ST-ZIP                                        |                                                                   |
| TITLE                      | <input type="checkbox"/> DELETE | 21 TITLE                                              | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       |                                 | 22 NAME                                               |                                                                   |
| STREET ADDRESS             |                                 | 23 STREET ADDRESS                                     |                                                                   |
| CITY-ST-ZIP                |                                 | 24 CITY-ST-ZIP                                        |                                                                   |
| TITLE                      | <input type="checkbox"/> DELETE | 31 TITLE                                              | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       |                                 | 32 NAME                                               |                                                                   |
| STREET ADDRESS             |                                 | 33 STREET ADDRESS                                     |                                                                   |
| CITY-ST-ZIP                |                                 | 34 CITY-ST-ZIP                                        |                                                                   |
| TITLE                      | <input type="checkbox"/> DELETE | 41 TITLE                                              | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       |                                 | 42 NAME                                               |                                                                   |
| STREET ADDRESS             |                                 | 43 STREET ADDRESS                                     |                                                                   |
| CITY-ST-ZIP                |                                 | 44 CITY-ST-ZIP                                        |                                                                   |
| TITLE                      | <input type="checkbox"/> DELETE | 51 TITLE                                              | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       |                                 | 52 NAME                                               |                                                                   |
| STREET ADDRESS             |                                 | 53 STREET ADDRESS                                     |                                                                   |
| CITY-ST-ZIP                |                                 | 54 CITY-ST-ZIP                                        |                                                                   |
| TITLE                      | <input type="checkbox"/> DELETE | 61 TITLE                                              | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       |                                 | 62 NAME                                               |                                                                   |
| STREET ADDRESS             |                                 | 63 STREET ADDRESS                                     |                                                                   |
| CITY-ST-ZIP                |                                 | 64 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 registered agent or trustee authorized 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 attached sheet with a 1 address.

SIGNATURE:  6/18/98 (813) 734 5302

CR2E034 (10/97)