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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000045368 (3)

GRENNAN, GASE & DUMM, P.A.

Principal Place of Business	Mailing Address
1411 EDGEWATER DR.	1411 EDGEWATER DR.
SUITE 103	SUITE 103
ORLANDO FL 32804	ORLANDO FL 32904

FILED Apr 14 1998 8:00am Secretary of State

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/28/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 21 59-3382448 Not Applicable 26 Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 5016 200 Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zip Country Country This corporation owes or has paid the current year Intangible 24 30 Personal Property Tax due June 30. ☐ No 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name GASE, JAMES E 1411 EDGEWATER DR. Street Address (P.O. Box Number is Not Acceptable) SUITE 103 83 ORLANDO FL 32804 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 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 life if applicable (NO1L Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE 1 1 T(T) F Addition GRENNAN, GERALD C NAME 1.2 NAME 1411 EDGEWATER DR., STE. 103 STREET ADDRESS 1.3 STREET ADDRESS ORLANDO FL 32804 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Addition TITLE 2.1 TITLE GASE, JAMES E NAME 2.2 NAME 1411 EDGEWATER DR., STE. 103 STREET ADDRESS 23 STREET ADDRESS ORLANDO FL 32804 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change TITLE 3.1 TITLE MALIE 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST-ZIP Change ☐ DELE1E TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 \$TREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE TITLE 5.1 TITLE Change NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5 4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

14. Thereby certify that the information supplied with this filling 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 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 chapter 607, and that my name appears in Block 12 or Block 13 if chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 607, Florida Statutes.