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

APPROVED
AND
FILED

1998 JUN 30 PM 1:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT
CORPORATION
ANNUAL REPORT

1997-1998 AR

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

DOCUMENT # P96000049674

1. Corporation Name
LEE Schils INC.

Principal Place of Business
370 Woodlawn Rd.
Freeport FL. 32439

Mailing Address

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	
21 Freeport	26 See Above	4. FEI Number	Applied For / Not Applicable
Suite, Apt. #, etc. 22 370 Woodlawn Rd.	Suite, Apt. #, etc. 27 370 Woodlawn Rd.	5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
City & State 23 Freeport FL.	City & State 28 Freeport FL.	6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
Zip 24 32439 Country 25 WALTON	Zip 29 32439 Country 30 WALTON	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	10. Name and Address of New Registered Agent
Rebecca Schils 370 Woodlawn Rd. Freeport, FL. 32439	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 300002578073--2 -07/01/98--01092--004 84 City ****315.00 FL 85 ****315.00

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: Rebecca Schils Rebecca Schils Vice President 6/29/1998
Signature, type or print name of reg. agent or officer if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	President	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	LEE Schils		1.2 NAME	
STREET ADDRESS	370 Woodlawn Rd.		1.3 STREET ADDRESS	
CITY-ST-ZIP	Freeport FL 32439		1.4 CITY-ST-ZIP	
TITLE	Vice President	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	Rebecca Schils		2.2 NAME	
STREET ADDRESS	370 Woodlawn Rd.		2.3 STREET ADDRESS	
CITY-ST-ZIP	Freeport FL. 32439		2.4 CITY-ST-ZIP	
TITLE		☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4 CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4.2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	SCC 6-30-98

CR2E034 (10/97)

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 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 added above.

SIGNATURE: Rebecca Schils Rebecca Schils VP 6/29/98 850-830-0150
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Telephone #

6/8/98

P96000049674

TO Whom it May Concern:

RE: LEE Schils, INC.

ID# 59:3383083

This Letter is to inform you. As of this date I have not received any Notification from your office. I would like to have this Corp. reinstated. Here is a check for 97,98. If there are questions, Please feel free to call. 850-835-0150

Rebecca Schils