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

FILED May 05 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # P96000059370 (2) J.W. PEACE ENTERPRISES, INC. Principal Place of Business Mailing Address 7045 RAMOTH DRIVE 7045 RAMOTH DRIVE JACKSONVILLE FL 32226-3211 JACKSONVILLE FL 32226-3211 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/15/1996 2a. Mailing Address 2. Principal Place of Business 4. FEI Number Applied For 21 59-3390901 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 6. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 28 Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. X Yes ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 61 Name PEACE, JEANNETTE M 7045 RAMOTH DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) JACKSONVILLE FL 32228-3211 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 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 opligations of, Section 607.0505, Florida Statutes. Yresident SIGNATURE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE 1.1 TITLE Change Addition TITLE PEACE, JACK W NAME 1.2 NAME 7045 RAMOTH DRIVE STREET ADDRESS 1.3 STREET ADDRESS JACKSONVILLE FL 32228-3211 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE PEACE, JEANNETTE M NAME 2.2 NAME 7045 RAMOTH DRIVE STREET ADDRESS 2.3 STREET ADORESS JACKSONVILLE FL 32228-3211 CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Change Addition TATLE 31 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME

14. I hereby 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 cath; 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 on an attachment with an address.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE 6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-S1-ZIP

TITLE

NAME

(COC 2annett.

DELETE

4-20-98

Change

Addition

(10/97)

CR2E034