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

P96000068557 (3) DOCUMENT #

HUNDLEY & ASSOCIATES, INC. Principal Place of Business Mailing Address POST OFFICE BOX 16932 3001 58 AVE S SAINT PETERSBURG FL 33733 DO NOT WRITE IN THIS SPACE SAINT PETERSBURG FL 33712 3. Date Incorporated or Qualified US 08/16/1996 2a. Mailing Address 2. Principal Place of Busines FEI Number Applied For 1505 Eden Isla Blud NZ 59-3396460 Not Applicable 26 Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State 6. Election Campaign Financing \$5.00 May Be eterslovra Trust Fund Contribution Added to Fees 28 Country Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 29 30 g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name HUNDLEY, MICHAEL D -8001 58 AVE 9 Breet Address (P.O. Box Number is Not Acceptable) 82 -1010 - 83 ST-PETERSBURG FL 88712 Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered 11. Pursuant to the provision office or registered a agent. I am familiar of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered SIGNATURE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. DELETE Change Addition TITLE HUNDLEY, DAVID D NAME 4200 SATH AVENUE SOUTH 1505 Eden Fale 15 STREET ADDRESS SAINT-PETEROBURG PL 33711 6T Petershurg 32 70:18-ST-ZIP CITY-ST-ZIP Change Addition 21 TITLE TITLE 2.2 NAME NAME 4200 SATH AVENUE SOUTH 526 Coundon Ten 2 3 STREET ADDRESS STREET ADDRESS SAINT-PETERSBURG FL-99741 Buldwinsuille NY 13Ax ZJEP CITY-ST-ZIP 3 1 TITLE ☐ Change ■ Addition TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3 4. CITY-ST-ZIP CITY-ST-ZIF Addition DELETE 4.1 THILE Change Change TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 51 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP DELETE 6.1 TITLE ☐ Change ■ Addition TITLE NAME 6.2 NAME

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 og the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in officer or director of the corporation of Block 12 or Block 13 if changed, or g

6.3 STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

317/253-5653

FILED

Apr 20 1998 8:00am

Secretary of State