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

DOCUMENT # P96000072429 (9)

LI ROCK, INC.

FILED Feb 16 1998 8:00am Secretary of State

Principal Place of Business Mailing Address							e sagirgar isa santa genti garti Affit; Aftit Patit 19818	(19)1 GIBIO HOLD IGII HOL			
	N NOVA ROAD MOND BEACH FL 321	74		82 N NOVA ROAD PRMOND BEACH FL	32174			DO NOT WRITE IN THIS \$	PACE		
								Date Incorporated or Qualified 08/30/1996			
2. P	2. Principal Place of Business			2a, Mailing Address				4. FEI Number	Applied For		
21			26					59-3400949	Not Applicable		
Suite, Apt. #, etc			27	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required		
23	City & State		28	City & State 28				Election Campaign Financing Trust Fund Contribution			
24 24	ip.	Country	29	Zip	30 Co	ıntry	,	8. This corporation owes or has paid the curre Personal Property Tax due June 30.	ent year Intangible Yes 🔲 No		
g. Name and Address of Current Registered Agent								10. Name and Address of New Registered A	gent		
282 N NOVA ROAD ORMOND BEACH FL 32174						81	Name				
						82	Street Addre	et Address (P.O. Box Number is Not Acceptable)			
						83					
1						84	City		85 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.

agent i am tamiliar with, and accept the dirigations of, Section 607.0505, Florida Statutes.													
SIGNATURE Signature, typical or protect protect of registered agent and filled appreciable. (NOTE Registered Agent signature required when reinstaling) DATE													
12.	OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12										
TITLE		DELETE	1.1 TITLE		Change	Addition							
NAME	BUTLER, RAYMOND A.		1 2 NAME										
STREET ADDRESS	715 S. BEACH STREET, #209-D		1.3 STREET ADDRESS										
CITY - ST - ZIP	DAYTONA BEACH FL		14 CITY-ST-ZIP										
THLE	VPTD	DELETE	2 1 TITLE		Change	☐ Addition							
NAME	Butler, Kathleen G.		22 NAME										
STREET ADDRESS	715 S. BEACH STREET, #209-D		23 STREET ADDRESS										
CITY-ST-ZIP	DAYTONA BEACH FL		2 4 CITY-ST-ZIP										
TITLE		DELETE	31 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 T∤TLE		☐ Change	Addition							
NAME			6.2 NAME										
STREET ADDRESS			6.3 STREET ADDRESS										

14. Thereby 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 armual 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 on an attachment with an address.

6.4 CITY - ST - ZIP

SIGNATURE: TRANSPORMENT. DENTEN KATHLEEN G. BUTLER 2/10/98 (904)676-2148

CR2E034 (10/97)