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 # P96000076861 (9)

TY-GWYN INVESTMENTS INC.

Principal Place of Business Mailing Address 3412 CLARK ROAD 3412 CLARK ROAD DO NOT WRITE IN THIS SPACE SARASOTA FL 34231 SARASOTA FL 34231 3. Date Incorporated or Qualified 09/13/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 3935 TORREY PWER BLUD 26 65-0696289 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Sarasuta 23 Trust Fund Contribution Added to Fees 28 Country This corporation owes or has paid the current year Intangible 34238-814 25 U1 19 30 Personal Property Tax due June 30. Yes 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent R1 Name WATKINS, DAVID David WATKINS 8347-CYPRESS HOLLOW DRIVE Street Address (P.O. Box Number is Not Acceptable)
3935 TORREY PINES BUS 82 SARASOTA FL 84238-83 84 SARACOTA 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 title if applicable. (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE Change Addition TITLE 11 TITLE NAME WATKINS, DAVID 1.2 NAME WATKING, DAVID 3936 TORREY PINES BLUD -6947-CYPRESS HOLLOW DRIVE STREET ADDRESS 1.3 STREET ADDRESS SARASOTA FL 34238 SARASOTA CITY-ST-7IP 1.4 City-St-7IP ■ DELETE Change ___ Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADORESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Addition TITLE Change 3.1 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 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

CICNATURE:

CITY-ST-ZIP

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 of 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 gli an attachment with an address.

ARR 27 1998

941-921-9612

FILED

May 19 1998 8:00am

Secretary of State