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

FILED Feb 05 1998 8:00am Secretary of State

DOCUMENT # P96000081439 (7)				Secretary of State
JOHN F	HAPPLE SOLAR, INC.			
Principal Place	a of Business	Mailing Address		
·		-	P. 45.11 107	,
3605 GROVE TERRACE DRIVE 3605 GRÔVE TERRACE DRI LAKLEAND FL 33813 LAKLEAND FL 33813			DRIVE	
				DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
a Principal P	face of Business	2a. Mailing Address		09/30/1996 4. FEI Number 5/2 - 3//200/7 Applied For
21	iace of Bushless	26 Maining Address		4. FEI Number 59-34200/7 Applied For APPLIED FOR Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		\$8.75 Additional
22		27		5. Certificate of Status Desired Fee Required
City & State	е	City & State		6. Election Campaign Financing \$5.00 May Be
23		28		Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24	9. Name and Address of Curren	29 Registered Agent	30	Personal Property Tax due June 30. X Yes No 10. Name and Address of New Registered Agent
110		riogistered Agent	81 Na	lame
	RRISON, JOSEPH A			
	10 SOUTH FLORIDA AVENUE		82 Str	treet Address (P.O. Box Number is Not Acceptable)
SUITE 3 LAKELAND FL 33813			83	
Da	CENTO 12 000 IO		84 Cit	No.
				
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 changin 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 agent. I am the first with, and accept the obligations of, Section 607.0505, Florida Statutes.				
agent, i ar	m familiar with, and accept the obliga	tions of, Section 607.0505, F	Torida Statutes.	s corporations social of directors. Thereby accept the appointment as registered
SIGNATURE		e say aye se say ay		
12.	Signature, typed or pr .ed name of registered ages OFFICERS AND		TE: Registered Agent sign	gnature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	DELETE	1.1 TITLE	Change Addition
NAME	HAPPLE, JOHN V		1,2 NAME	
STREET ADDRESS	3605 GROVE TERRACE DRIVE	•	1.3 STREET ADDRE	RESS
CITY-ST-ZIP	LAKELAND FL 33813		1.4 CITY-ST-ZIP	P
TITLE	VPST	☐ DELETE	2.1 TITLE	Change Addition
NAME	HAPPLE, MARY M		2.2 NAME	·
STREET ADDRESS	3605 GROVE TERRACE DRIVE		2.3 STREET ADDRE	RESS
CITY-ST-ZIP	LAKELAND FL 33813	T of the state of	2. 4 CITY - ST - ZIP	
TITLE		DELETE	3.1 TITLE	Change Addition
NAME STREET ADDRESS			3.2 NAME 3.3 STREET ADDRE	pree
STREET ADDRESS CITY-ST-ZIP			3.4. CITY-ST-ZIP	
TITLE	WAR AND THE STATE OF THE STATE	☐ DELETE	4.1 TITLE	Change Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRE	RESS
CiTY - ST - ZiP			4.4 CITY - ST- ZIP	Р
TITLE		DELETE	S.1 TITLE	Change Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRE	RESS
CITY-ST-ZIP		The eve	5.4 CITY-ST-ZIP	
TITLE		DELETE	6.1 TITLE	L Change Addition
NAME CYPICET ADDRESS			6.2 NAME	DECP.
STREET ADDRESS CITY-ST-ZIP			6.3 STREET ADDRE 6.4 CITY - ST - ZIP	
OUT 1 - OT - ZIF			UN OIL I POIL ZIF	

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 on an attachment with an address.

SIGNATURE:

Mary Mytapple REC

1-27-98

941-644-2063