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

**PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham FILED ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS 18 JUN 19 AH 8: 38 DOCUMENT #
1. Corporation Name P96000082645 (8) SLUKLIMENT OF STATE ⊦ALLAHASSEE, **FLORI**DA TUNING POINT THREE, INC. Principal Place of Business Mailing Address 7021 SPENCER DRIVE 7021 SPENCER DRIVE TALLAHASSEE FL 32312 TALLAHASSEE FL 32312 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/07/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3407629 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zip Country Zφ Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name LIPTON, RONALD J 7021 SPENCER DRIVE Street Address (P.O. Box Supply 19 Ng Adjanuar 9 19 5 5 - - -82 TALLAHASSEE FL 32312 06/23/99--01031--004 83 \*\*\*\*150.00 \*\*\*\*150.00 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. **SIGNATURE** Signature, typed or poniod name of registere Lagent and the if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELET**E** TITLE 1.1 TITLE Change Addition LIPTON, RONALD NAME 1.2 NAME 7021 SPENCER DR STREET ADDRESS 1.3 STREET ADDRESS TALLAHASSEE FL CITY-ST-ZIP 1.4 CiTY - ST - ZIP DELETE TITLE 2.1 TITLE Change ... Addition CARROLL, MARSHALL NAME 2.2 NAME LONNIE GRAY RD STREET ADDRESS 2.3 STREET ADDRESS Tallahassee Fl CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE TITLE 3.1 TITLE ☐ Change Addition PEART, GREG NAME 3.2 NAME 248 CREPE MYETTE LN STREET ADDRESS 3.3 STREET ADDRESS CAIRO GA CITY-ST-ZIP 34. CITY-ST-7IP TITLE DELETE Change 4 1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4 4 CITY - ST - ZIP CITY-ST-ZIP TITLE DELETÉ 5.1 TITLE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP TITLE DELETE 6.1 1111 F Chanc NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

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 of suppliemental annual report is frug 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 or provided 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 **t**in



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6/9/98

To Whom It May Concern:

I am sorry for the late filing of this report. I have had a death and a severe injury within my immediate family. I would greatly appreciate your consideration in allowing me to pay the \$150.00 filing fee.

Sincerely

Ronald J. Lipton

President