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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P96000086898 (9) DOCUMENT #

F.B. & R. CORPORATION

1102 SW 80 TERRACE 1102 SW 80 TERRACE GAINESVILLE FL 32607 **GAINESVILLE FL 32607** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/21/1996 2a. Mailing Address 4. FEI Number Applied For 2. Principal Place of Business 59-3432771 Not Applicable 21 Suite. Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Ζıp Country Country Zip 8. This corporation owes or has paid the current year Intangible Yes ☐ No Personal Property Tax due June 30. 30 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name SAJER, FRANK P 1330-B NW 6 ST 82 Street Address (P.O. Box Number is Not Acceptable) **GAINESVILLE FL 32601** 83 84 Zip Code 1. 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 1.1 TITLE D/5/7 TITLE Fuller Melba II FÚLLER, JOHN R NAME 1.2 NAME 1102 SW 80 TERRACE STREET ADORESS 1.3 STREET ADDRESS Gaineville, F1 GAINESVILLE FL 32607 1.4 CITY - ST - ZIP CITY-ST-ZIP Addition Change DELETE 2.1 TITLE titi F BARNES, GEORGE H JR Fuller, John R. NAME 2.2 NAME 622 NW 103 TERRACE 2.3 STREET ADDRESS STREET ADDRESS **GAINESVILLE FL 32606** 2.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE TITLE 3.1 TITLE ROSKO, GEORGE 3.2 NAME NAME 8520 SW 79TH TERR 3.3 STREET ADDRESS STREET ADDRESS **GAINESVILLE FL 32608** 3 4. CITY-ST-ZIP CITY-ST-ZIP Change ___ Addition DELETE TITLE 4.1 TITLE NAME 4 2 NAME STREET ADDRESS 4 3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 51 TITLE TITLE 5.2 NAME NAME **53 STREET ADDRESS** STREET ADDRESS

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.

54 CITY-ST-ZIP

63 STREET ADDRESS

6.4 CITY-ST-ZIP

61 TITLE

6.2 NAME

☐ DELETE

Change

Addition

FILED

Apr 17 1998 8:00am

Secretary of State