FILED Apr 20, 1999 8:00 am Secretary of State

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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

DIVISION OF CORPORATIONS 1999 DOCUMENT # P96000088181 COOK & COMPANY, INC. Principal Place of Business Malting Address P.O. BOX 691061 13957 - 89 OSPREY LINKS ROAD ORLANDO FL 32869-1061 ORLANDO FL 32837 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 10/25/1996 Applied For 2a. Mailing Address FEI Number 2. Principal Place of Business 59-3422666 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired \Box Fee Required 27 22 \$5.00 May Be City & State · City & State 6. Election Campaign Financing Added to Fees Trust Fund Contribution 28 23 Country Zip This corporation owes the current year intangible Country Zip X Yes Personal Property Tax. 29 30 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name ROSENBERG, STANLEY F Street Address (P.O. Box Number is Not Acceptable) 1941 ALOMA AVENUE 83 #212 WINTER PARK FL 32792 Zip Code 84 85 City FI 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 (NOTE: Registered Agent signature requi Signature, typed or printed name of registered agent and title if applicable CR2E034,(11/98) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13 12. Addition DELETE ☐ Change 1.1 TITLE me 1.2 NAME NAME COOK, DONALD A 13957 OSPREY LINKS RD 1.3 STREET ADDRESS STREET ADDRESS 1.4 CITY-ST-ZIP ORLANDO FL CITY-ST-ZIP Addition Change DELETE 21 TITLE TITLE 22 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition □ DELETE 31 TITLE " TIRLE 32 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP C/TY-ST-ZF Addition Change J DELETE 41 mE MILE 4, 2 NAME NAME A 3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZF Addition DELETE 5.1 TITLE mle 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-7IP

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, with all other like empowered.

61 TITLE

62NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

DELETE

SIGNATURE:

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TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE REQUIRED

ANATHRE AND TYPED OR PRINTED HAVE OF SEQUENCE OF DIRECTOR

SIGNATURE REQUIRED

SIGNATU

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Change

Addition

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