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

P96000092912 (0) DOCUMENT

JOSEPH J. GRAMIGNA, INC.

FILED Feb 06 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 1528 BAY WOODS RD 1528 BAY WOODS RD **GULF BREEZE FL 32561 GULF BREEZE FL 32561** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/08/1996 2. Principal Place of Business 2a. Mailing Address 4. FEi Number Applied For 26 59-3407804 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Country 8. This corporation owes or has paid the current year Intangible 25 29 30 Personal Property Tax due June 30. 🔀 Yes 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent GRAMIGNA, JOSEPH J Name 1528 BAY WOODS RD Street Address (P.O. Box Number is Not Acceptable) **GULF BREEZE FL 32561** 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. (NOTE Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. ___ DELETE TITLE 1.1 TITLE Change Addition JOSEPH J GRAMIGNA NAME 12 NAME 1528 BAY WOODS RD STREET ADORESS 1.3 STREET ADDRESS **GULF BREEZE FL** CITY-ST-ZIF 1.4 CITY - ST-ZIP DELETE TITLE 2.1 TITLE Change Addition MARY E GRAMIGNA NAME 2.2 NAME 1528 BAY WOODS RD STREET ADDRESS 2.3 STREET ADDRESS **GULF BREEZE FL** CITY - ST - ZIF 2. 4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TiTLE Change Addition NAME 4, 2 NAME STREET ADDFESS 4.3 STREET ADDRESS C:TY - ST - ZIP 4.4 CITY - ST- ZIP DELETE Change TiTLE Addition 5.1 TITLE NAME 5.2 NAME STREET ADDFESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY-ST-ZIP DELETE TITLE 8,1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY - ST - ZIP 6.4 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 or the receiver or trustee expowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed of on an attachment with a gaddress.

SIGNATURE:

2/1/98

850 932 9651