FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 Mar 09 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # P96000098373 (9) CHAMPION SALES & BROKERAGE CO. Principal Place of Business Mailing Address 1206 LADY GUINEVERE DRIVE 1206 LADY GUINEVERE DRIVE VALRICO FL 33594 VALRICO FL 33594 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/01/1997 2. Principal Place of Business 2a. Mailing Address 59-34622 26 Suite, Apt. #, etc Suite, Apt. #, etc. 5. Certificate of Status Desired City & State City & State 6. Election Campaign Financing Trust Fund Contribution 23 Country Zip Yes 24 Personal Property Tax due June 30. 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent B1 Name TIDWELL, JERRY E SR. 1206 LADY GUINEVERE DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) VALRICO FL 33594 83 City 84 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, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. DELETE TITLE 11 TIFLE

Secretary of State Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees 8. This corporation owes or has paid the current year Intangible □ No Zip Code

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition TIDWELL, JERRY E NAME 1.2 NAME 1206 LADY GUINEVERE DRIVE 1.3 STREET ADDRESS STREET ADDRESS VALRICO FL 33594 1.4 CITY - ST- ZIP CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE 3 1 TATLE Change Addition THILF 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - ST-ZIP CITY-ST-ZIP DELETE 4.1 TITLE Change Addition TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE ☐ Addition 51 TITLE Change 52 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP

14. 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 suppliemental 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 National Authority with an address.

SIGNATURE: