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

DOCUMENT # P9700001178 (7)

FILED Feb 05 1998 8:00am Secretary of State

MAUPIN HOUSE PUBLISHING, INCORPORATED Principal Place of Business Mailing Address 32 SW 42ND STREET 32 SW 42ND STREET GAINESVILLE FL 32607 GAINESVILLE FL 32607 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/06/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3428217 21 26 Not Applicable Suite, Apt, #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 22 Fee Required City & State City & State **\$5.00** May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Zip 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 BURKETT, BARBARA A R 2830 NW 41ST STREET Street Address (P.O. Box Number is Not Acceptable) SUITE I 83 **GAINESVILLE FL 32606** Zip Code 307 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered da. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered by 329 on 607 0505, Florida Statutes. 11. Pursuant to the provision office or registered a agent. I am familiary SIGNATURE (NOTE: Registered Agent signature required when reinstating) 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☐ DELETE TITLE 1.1 TITLE Change GRADDY, ROBERT H NAME 1.2 NAME 32 SW 42ND STREET STREET ADORESS 1.3 STREET ADDRESS **GAINESVILLE FL 32607** CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE DELETE 2.1 TITLE Change Addition GRADDY, JULIA H NAME 2.2 NAME 32 SW 42ND STREET STREET ADDRESS 2.3 STREET ADDRESS GAINESVILLE FL 32607 CITY - ST - ZIP 2.4 CiTY-ST-7IP DELETE TITLE 3.1 TITLE Change Addition 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 ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY-ST-ZIP TITLE DELETE ___ Change Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS **6 3 STREET ADDRESS** 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 of trustee empowered to execute his 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.

SIGNATURE:

352-373-5588