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

PROFIT CORPORATION ANNUAL REPORT

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

P97000004375 (6)

THE MATHESON CORPORATION

Mailing Address Principal Place of Business 640 COURT STREET 640 COURT STREET CLEARWATER FL 34616 CLEARWATER FL 34616 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/10/1997 2a. Mailing Address 2. Principal Place of Business 4. FEI Number Applied For 59 - 3421856 Not Applicable Suite, Apt. #. etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees Trust Fund Contribution 23 28 Zip Country Zφ Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes 30 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 BRENT HARMON MATHESON, R.T. Street Address (P.O. Box Number is Not Acceptable) 640 COURT STREET 82 640 COURT CLEARWATER FL 34616 83 Zip Code 3315 84 CLEARWATER 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, a 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, an accept the obligations of, Section 607.0505, Florida Statutes. 03/10/98 Scell consistence agent and title if applicable SIGNATURE. DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of re ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change DELETE PRESIDENT PD 1.1 TITLE TITLE BRENT L. HARMON MATHESON, R.T. 1.2 NAME NAME 640 COURT ST. **640 COURT STREET** 1.3 STREET ADDRESS STREET ADDRESS CLEARWATER, FL, 33756 **CLEARWATER FL 34616** CITY - ST - ZIP 1.4 CITY - \$1 - ZIP Change Addition DELETE 2.170708 TITLE SECRETARY GUSAN A. HARMON NAME 2.2 NAME 640 COURT ST. 2.3 STREET ADDRESS STREET ADDRESS CLEARWATER, FL. 3395 6 2.4 CITY - ST- ZIP CITY-ST-ZIP Addition Channe DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP DITY-ST-ZIP DELETE Change Addition 4.1 BILE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CHY-ST-ZIP CITY-ST-2IP Change ___ Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME STREET ADDRESS 5.3 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 eath; 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. 02/10/90 (B12) 443-3354

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

62 NAME

DELETE

Change

Addition

FILED

Aug 19 1998 8:00am

Secretary of State