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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000012852 (4)

DRAKE HOLDINGS, INC.

Principal Place of Business

Mailing Address

FILED Mar 30 1998 8:00am Secretary of State



2424 JOHN YOUNG PARKWAY 2424 JOHN YOUNG PARKWAY ORLANDO FL 32804 ORLANDO FL 32804 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 02/10/1997 2. Principal Place of Business
21 916 N. MASSACHUSETTS AVE 2a. Mailing Address FEI Number Applied For 916 N. MASSACHUSETTS AVE 26 Not Applicable Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing FLORIDA AKELAND Trust Fund Contribution Added to Fees 28 This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes Sono 29 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 ELSBERRY, MICHAEL ESQ. 215 NORTH EOLA DRIVE Street Address (P.O. Box Number is Not Acceptable) 82 ORLANDO FL 32801 83 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. breside pt Addition DELETE 1.1 TITLE Change TITLE JOHN W. DRAKESMITH DRAKESMITH, JOHN W 1.2 NAME NAME 2424 JOHN HOUNG PAREWAY 2424 JOHN YOUNG PARKWAY STREET ADDRESS 1.3 STREET ADDRESS ORLANDO FL 32804 1.4 CITY-ST-ZIP ORLANDO, FL 32804 CITY-ST-ZIP SECRETARY/TRE ASURAR Change Addition DELETE 2.1 TITLE TITLE ALAN REUBER 916 N. MASSACHUSETTS AVE. 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELET**E** Change Addition TITLE 4.1 TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 City-St-ZIP DELETE Change ■ Addition TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Addition 61 TITLE TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST - ZIP 14. Thereby 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 downer or truefce or powered 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 attail himself with an appears.