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 # P97000015808 (3)

GARDEN PATH SUPPLY, INC. Principal Place of Business Mailing Address 22300 N.W. 75TH AVENUE ROAD 22300 N.W. 75TH AVENUE ROAD MICANOPY FL 32667 MICANOPY FL 32667 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/18/1997 2. Principal Place of Business 2a. Mailing Address Applied For 26 Not Applicable 21 Suite, Apt #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired П Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees 23 Zip Zip Country Country 8. This corporation owes or has paid the current year Intangible Yes Yes 25 29 30 Personal Property Tax due June 30. 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 CORPORATE CREATIONS ENTERPRISES, INC. BERGER 4521 PGA BOULEVARD r is Not Acceptable)
75 TH AVENUE - ROA 82 Street SUITE 211 PALM BEACH GARDENS FL 33418 83 84 City 85 32667 MICANOPY 11. Pursuant to the privisions 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 appointment as registered agent. I am familiar with, and accept the appointment as registered agent. -16-98 SIGNATURE (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition 1 1 TITLE TITLE BERGER, SUSAN 12 NAME NAME 22300 N.W. 75TH AVENUE ROAD 1.3 STREET ADDRESS STREET ADDRESS MICANOPY FL 32667 CITY - ST - ZIP 1.4 CITY - ST - ZIP DELETE Addition TITLE 2.1 TITLE Change 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS CITY - ST-ZIP 2. 4 CITY-ST-ZIP TITLE DELETE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4, CITY-ST-ZIP CITY-ST-ZIP DELETE 4,1 TITLE Addition TITLE 4 2 NAME NAME STREET ADORESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY - ST-ZIP DELETE 5.1 TITLE ☐ Change Addition TITLE NAME 5 2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE ___ Change Addition 6.1 TITLE TITLE

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filling 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 13 if changed, or on an attachment with an address.

6.2 NAME 6.3 STREET ADDRESS

SIGNATURE:

NAME

STREET ADDRESS

BUT SHI HEUISUSAN M. BERGER

1-16-98 352-591-2184

FILED

Jan 26 1998 8:00am

Secretary of State

R2E034 (10/97)