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

FILED Jul 02 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State **1998** DIVISION OF CORPORATIONS DOCUMENT # P97000029695 (8) BLANCHETTE CONSTRUCTION, INC. Principal Place of Business Mailing Address 7226 KINGSBURY CIRCLE 7226 KINGSBURY CIRCLE TAMPA FL 33610 TAMPA FL 33610 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/31/1997 2. Principal Place of Business 2a. Mailing Address Applied For 59-3449356 21 Not Applicable 26 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 Trust Fund Contribution 23 Added to Fees Zip Country Country This corporation owes or has paid the current year Intangible X Yes ☐ No 24 25 30 Personal Property Tax due June 30. 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name MCANNALLY, WILLIAM H IV 420 WARRANDON BLVD STE 202 82 Street Address (P.O. Box Number is Not Acceptable) Brandon FL 33511 83 Zip Code 84 City 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) CR2E034 (10/97 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE DIRECTOR/PRESIDENT Change TITLE 1.1 TITLE NAME **BLANCHETTE**. STEVE G 1.2 NAME STEVE GALANCHETTE STREET ADDRESS 7226 KINGSBURY CIRCLE 1.3 STREET ADDRESS TAMPA FL 33610 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition 2.1 THLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 City-ST-ZIP CITY-51-ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition 4.5 TITLE TITLE NAME 4. 2 NAME STREET ADORESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 51 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition 6.1 TITLE TITLE NAME 6.2 NAME

6.3 STREET ADDRESS

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 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.

STREET ADDRESS

CITY-ST-ZIP