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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

STREET ADDRESS

STREET ADDRESS

Block 12 or Block 13 if ch

CITY-ST-ZIP

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000047137 (9)

THE WRITE COMPANY OF PALM BEACH, INC.

167 CHILEAN AVE 167 CHILEAN AVE PALM BEACH FL 33480 PALM BEACH FL 33480 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/29/1997 2a. Mailing Address 26 6314 Adams St. 2. Principal Place of Business Applied For 65-0756295 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional П 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 8. Election Campaign Financing Palm Beach Gardens, FL 23 28 Trust Fund Contribution Added to Fees Ζiρ Country Country This corporation owes or has paid the current year Intangible 33418 ☐ No 30 Personal Property Tax due June 30. Yes 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name Patregnani, donald e 167 CHILEAN AVE 82 Street Address (P.O. Box Number is Not Acceptable) PALM BEACH FL 33480 83 84 City 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 lamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes. **SIGNATURE** (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE X Change Addition TITLE 1.1 TITLE President NAME PALMER, TIMOTHY 1.2 NAME Timothy A Palmer STREET ADDRESS 167 CHILEAN AVE 1.3 STREET ADDRESS 6314 Adams St. CITY-ST-ZIP PALM BEACH FL 33480 1.4 CITY-ST-ZIP 33418 Palm Beach Gardens, DELETE Change X Addition 21 TITLE TITLE Vice President NAME 22 NAME Donald E Patregnani STREET ADDRESS 2.3 STREET ADDRESS 6314 Adams St. CITY-ST-ZIP 2.4 CITY - ST - ZIP Palm Beach Gardens, DELETE Addition TITLE 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST - 7IP CITY-ST-ZIP Change TITLE DELETE 4.1 TITLE Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREFT ADDRESS CITY-ST-ZIP 4.4 CHY-S1-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME

53 STREET ADDRESS

5.4 CITY - ST - ZIP

61 DULE

6.2 NAME 6.3 STREET ADDRESS

DELETE

or on an attachment with

FILED May 13 1998 8:00am Secretary of State



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 supplicmental 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

___ Change

Addition