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

FILED
Apr 22 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P97000075788 (4)**

1. Corporation Name
APCON SERVICES, INC.

Principal Place of Business	Mailing Address
14404 REUTER STRASSE CIRCLE APARTMENT #2 TAMPA FL 33613	14404 REUTER STRASSE CIRCLE APARTMENT #2 TAMPA FL 33613

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/02/1997

2. Principal Place of Business	2a. Mailing Address
21 4611 Fox Hunt Drive	26 4611 Fox Hunt Drive
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 Tampa, FL	28 Tampa, FL
24 Zip 33624 — 25 Country U.S.A.	29 Zip 33624 — 30 Country U.S.A.

4. FEI Number: 59-3470609 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. ☐ Yes ☑ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
ROBERMAN, BRUCE A 14404 REUTER STRASSE CIRCLE APARTMENT #2 TAMPA FL 33613	81 Name: Richard L. Hayner 82 Street Address (P.O. Box Number is Not Acceptable): 4611 Fox Hunt Drive 83 84 City: Tampa FL 85 Zip Code: 33624

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: Richard L Hayner — 4/15/98
Signature, typed or printed name of agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	1.1 TITLE: P/S/D 1.2 NAME: Richard L. Hayner 1.3 STREET ADDRESS: 4611 Fox Hunt Drive 1.4 CITY-ST-ZIP: Tampa, FL 33624	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	2.1 TITLE: V/T/C 2.2 NAME: Clifford W. Palmer 2.3 STREET ADDRESS: 26933 Roseann Place 2.4 CITY-ST-ZIP: Lutz, FL 33549	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (10/97)

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 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.

SIGNATURE: Richard L Hayner, President — 4/15/98 — (813)269-9485