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 # P97000080442 (1)

ARBOR RIDGE INVESTMENTS, INC.

| 6578 UNIVERSITY BLVD | 6578 UNIVERSITY BLVD |
|-----------------------------|----------------------|
| Principal Place of Business | Mailing Address |
| | |
| AUDOU UIDAE IIAAES IIAIEIAI | O' IIIO' |

FILED May 14 1998 8:00am Secretary of State



| 8578 UNIVERS WINTER PARK | | 6578 UNIVERSITY BLVD WINTER PARK FL 32792 | | DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/17/1997 |
|--|--|--|-------------------------------|--|
| ⊢ · | ace of Business | 2a. Mailing Address | | 4. FEI Number Applied For |
| 21 | | 26 | | 59-3480 10 Not Applicable |
| Sulte, Apt. | #, etc. | Suite, Apl. #, etc. | | 5. Certificate of Status Desired |
| City & State | 0 | City & State | | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees |
| Zip 24 | Country 25 | Ζφ 29 | Country 30 | 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No |
| | g. Name and Address of Currer | nt Registered Agent | | 10. Name and Address of New Registered Agent |
| MIL | LER, WARREN | | 81 Na | ame |
| 6578 UNIVERSITY BLVD WINTER PARK FL 32792 | | | 82 Str | reel Address (P.O. Box Number is Not Acceptable) |
| | | | 83 | |
| | | | 84 Cit | y FL 85 Zip Code |
| agent. I a | Strature, ground or justice of any of register and any | ent acad totle if applicable (NC | DTE: Registered Agent sign | nature required when reinstating) UATE DATE |
| 12. | PD OFFICERS AN | D DIRECTORS DELETE | 13. | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition |
| TITLE NAME | MILLER, WARREN | ["] otreit | 1.1 TITUE | Change Addition |
| STREET ADDRESS | 6578 UNIVERSITY BLVD | | 1.2 NAME 1.3 STREET ADDR | 223 |
| CITY-ST-ZIP | WINTER PARK FL 32792 | | 1.4 CITY-ST-ZIP | |
| TITLE | VD | ☐ DELETE | 2 1 TITLE | Change Addition |
| NAME | GRAVES, ROCKY R | | 2.2 NAME | |
| STREET ADDRESS | 6578 UNIVERSITY BLVD | | 2.3 STREET ADDR | ESS |
| CITY-ST-ZIP | WINTER PARK FL 32792 | | 2. 4 CITY - ST - ZIP | |
| TITLE | | DELETE | 3 1 TITLE | Change Addition |
| NAME OVOCET ADDRESS | | | 3 2 NAME | |
| STREET ADDRESS | | | 33 STREET ADDR | |
| CITY-ST-ZIP TITLE | | DELETE | 3.4. C(TY-ST-Z)P 4.1 TITLE | Change Addition |
| NAME | | — | 4 2 NAME | |
| STREET ADDRESS | | | 4 3 STREET ADDR | ESS |
| CITY-ST-ZIP | | | 4.4 CITY - ST - ZIP | <mark></mark> |
| TITLE | | DELETE | 51 TITLE | ☐ Change ☐ Addition |
| NAME | | | 5.2 NAME | |
| STREET ADDRESS | | | 5.3 STREFT ADDR | FSS |
| CITY-ST-ZIP | | - Deleve | 5 4 CITY-S1 - ZIP | |
| TITLE | | ☐ DELFTE | 61 TITLE | ☐ Change ☐ Addition |
| NAME expect apprece | | | 62 NAME | TCC |
| STREET ADDRESS | | | 63 STREET ADDR | |

14. 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 charging of on an all principly with an address.

21/20/04