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PROFIT CORPORATION ANNUAL REPORT

- 1998



FLORIDA DEPARTMENT OF STATE

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Mar 10 1998 8:00am

Secretary of State

Sandra B. Wartham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000085180 (2)

GERALD G. BROCHU, INC. Principal Place of Business Mailing Address 8844 RIDGE ROAD 8844 RIDGE ROAD **LARGO FL 33772 LARGO FL 33772** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/01/1997 2. Principal Place of Business 2a. Mailing Address Applied For 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 23 28 Trust Fund Contribution Added to Fees Country Zip 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. ☐ No 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name BROCHU, GERALD G 8844 RIDGE ROAD 62 Street Address (P.O. Box Number is Not Acceptable) **LARGO FL 33772** R4 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 any familiar with, and accept the optigations of, Section 607.0505, Florida Statutes. of regelier chargest and blie if applicable (NCITE: Begistered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE TITLE 1 1 TITLE BROCHU, GERALD G 1.2 NAME NAME STREET ADDRESS 8844 RIDGE ROAD 1.3 STREET ADDRESS LARGO FL 33772 CITY-ST-ZIP 1.4 CITY-S1-ZIP DELETE 2.1 TITLE Change ☐ Addition BROCHU, GILBERTA M 2.2 NAME 8844 RIDGE ROAD STREET ADDRESS 2.3 STREET ADDRESS LARGO FL 33772 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELLTE Change Addition 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP DELFTE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY - ST - ZIP 14. Thereby 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 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 trustree employeered 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.

Gerald G. Brochu

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