FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Motthem Secretary of State ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # P97000091674 (6) BERKSHIRE ONE-FIFTY, INC. Principal Place of Business Mailing Address 1124 GOODLETTE RD. 1124 GOODLETTE RD. NAPLES FL 34102 NAPLES FL 34102 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 10/24/1997 2. Principal Place of B 2a. Mailing Address Applied For 1804 Same Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Zip Country This corporation owes or has paid the current year Intangible Yes ☐ No 30 Personal Property Tax due June 30. 29 10. Name and Address of New Registered Agent Name and Address of Current Registered Agent 81 Name PFEUFFER, WILLIAM 1124 GOODLETTE RD. 82 Street Address (P.O. Box Number is Not Acceptable) NAPLES FL 34102 83 City 84 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 familiar with, any accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE ne of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Signature, typed OFFICERS AND DIRECTORS CR2E034 (10/97 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12, 13. TITLE 1.1 TITLE Change President 1.2 NAME NAME James P. Dulles STREET ADDRESS 1.3 STREET ADDRESS 7804 CoCo Bay Ct CITY-ST-ZIP 1.4 CITY-ST-ZIP Naples FL DELETE Change Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP Z, 4 CITY - ST - ZIP DELETE 3.1 TITLE Change Addition TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Addition Change 4.1 TITLE TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE oggog245326 Shange TITLE 6.1 TITLE ☐ Addition

6.2 NAME

JAMES

6.3 STREET ADDRESS

64 CITY - ST- 7IP

FILED Mar 10 1998 8:00am

14. I hereby certify that the information supplies with this filing does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes. I further certify that the information indicated on this annual report of supplies with this filing does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes. I further certify that the information indicated on this annual report of supplies with this filing does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes. I further certify that the information indicated on this annual report of supplies with this filing does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes. I further certify that the information indicated on this annual report of supplies with this filing does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes. I further certify that the information indicated on this annual report of supplies with the information indicated on this annual report of supplies with the information indicated on this annual report of supplies with the information indicated on this annual report of supplies with the information indicated on this annual report of supplies with the information indicated on this annual report of supplies with the information indicated on this annual report of supplies with the information indicated on this annual report of supplies with the information indicated on this annual report of supplies with the information indicated on this annual report of supplies with the information indicated on this annual report of supplies with the information indicated on this annual report of supplies with the information indicated on this annual report of supplies with the information indicated on this annual report of supplies with the information indicated on this annual report of supplies with the information indicated on this annual report of supplies with the information indicated on this annual report of supplies with the information indicated 941 2-16-98

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STREET ADDRESS

CITY-ST-ZIP