FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 May 04 1998 8:00am **PROFIT** OF STATE FLORIDA DEPARTMENT CORPORATION Sandra B. Mor Secretary of State **ANNUAL REPORT** Secretary of S DIVISION OF CORP TIONS 1998 DOCUMENT # P97000096689 (9) CNC COMPONENTS, INC. Principal Place of Business Mailing Address 13622 11TH TERRACE EAST 13622 11TH TERRACE EAST **BRADENTON FL 34202 BRADENTON FL 34202** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/10/1997 2. Principal Place of Business 21 7189 1230 Circle 2a. Mailing Address Applied For 7189 123rd Circle 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Largo 23 Largo 28 Trust Fund Contribution Added to Fees Country Country 8. This corporation owes or has paid the current year Intangible 3 25 PinellaS 29 537 8. Name and Address of Current Registered Agent Pinellas 33773 ☐ No 24 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent Name WHITAKER, DANIEL D 100 S ASHLEY DRIVE, SUITE 1190 82 Street Address (P.O. Box Number is Not Acceptable) **TAMPA FL 33602** 8.3 Zip Code 84 City 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** Signature, typod or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 CR2E034 (10/9) Addition DELETE Change TITLE D 1.1 TITLE NAME **CONKEL, KEVIN A** 12 NAME **13622 11TH TERRACE E** STREET ADDRESS 1.3 STREET ADDRESS CITY-ST-ZIP **BRADENTON FL 34202** 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 31 TITLE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE NAME 6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP 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 supplemental arrival 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.

Karin a

STREET ADDRESS CITY-ST-ZIP

CIGNATUDE: