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

FILED Jul 01 1998 8:00am PROFIT .. FLORIDA DEPAREMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # P97000097632 (8) TUNNEL CREEK COMMUNICATIONS, INC. Principal Place of Business Mailing Address 1704 SW SAINT ANDREWS DR. PALM CITY FL 34800 1764 SW SAINT ANDREWS DR. PALM CITY FL 34900 319 Clematis St., #515 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified WEST PALM BEACH, FL 33401 11/13/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 1900 NE DIVISION X Not Applicable Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 201 Fee Required City & State 6. Election Campaign Financing \$5.00 May Be BEHCH Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible WPB DESCHUTE 29 Personal Property Tax due June 30 X Yes □ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent SANDERS, MARY ANN CARPENTER 1764 ŚW SAINT ANDREWS DR. 82 Street Address (P.O. Box Num PALM-CITY FL 34990-MARBLEWOOD COURT 83 JUPITER _33458 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 agon, or both, in the State of Linda 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 abligations of Section 607,0505, Florida Statutes. SIGNATURE (NOTE Registered Agent signature required when reinstating) (10/97 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE RESIDENCT SAM CARPENTER NAME 1.2 NAME 1764-SW-SAINT ANDREWS DR STREET ADDRESS 1.3 STREET ADDRESS 2422 NE Conners, 14PT A CITY-ST-ZIP 1.4 CITY- ST-ZIF DELETE Change Addition THUE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 City - St - 7/P DELETE 3 1 TITLE Change Addition TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST- ZIP Addition DELETE Change 5.1 TITLE TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Addition

6.1 TITLE

62 NAME

6.3 STREET ADDRESS

64 CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

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 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 algorithment with an address. 4.2498 641 330 B9B7

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