FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 Mar 25 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 P97000100695 (0) DOCUMENT # GARY W. BRANNON, CPA, P.A. Principal Place of Business Mailing Address 226 TAMPA AVENUE WEST 226 TAMPA AVENUE WEST VENICE FL 34285 VENICE FL 34285 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/26/1997 2. Principal Place of Business 2a. Mailing Address Applied For 65-0795343 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. ☐ Yes □ No 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 BRANNON, GARY W 226 TAMPA AVENUE WEST Street Address (P.O. Box Number is Not Acceptable) 82 VENICE FL 34285 83 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 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Brannon Gary Brannon 3-20-98 (NOTE: Registered Agent signature required when reinstating) CR2E034 (10/97 12. OFFICERS AND DIRECTORS 13 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change DELETE Addition TITLE President Director 1.1 TITLE Gary Brannon NAME 12 NAME Wood ingham Tr STREET ADDRESS 1.3 STREET ADDRESS 34292 CITY-ST-ZIP 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 3.1 TITLE NAME 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 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS**

CITY-ST-ZIP 6.4 CITY-ST-ZIP 14. I 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 changed, or on an attachment with an address.

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

DELETE

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

CIGNATURE: Marca Blancon

Gary Brannan

2-20-98

941-486-82-97

Change

Addition