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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000101069 (7)

THE WEDDING FOUNTAIN, INC.

Principal Place of Business

Mailing Address

FILED May 11 1998 8:00am Secretary of State



2950 GULF TO BAY BLVD. 2950 GULF TO BAY BLVD. CLEARWATER FL 33759 **CLEARWATER FL 33759** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/01/1997 2. Principal Place of Business
11 2950 GULF TO BAY BLVD. Applied For SAME Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 30 Personal Property Tax due June 30. □ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name FINANCIAL FOUNDATIONS, INC. 2843 THAXTON DR., SUITE 37 82 Street Address (P.O. Box Number is Not Acceptable) PALM HARBOR FL 34684 83 Zip Code 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 2010. F. MACTIN. (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE PRESIDENT /SEC. 1.1 TITLE HALSTEAD, STEPHEN L 1.2 NAME NAME 2950 GULF TO BAY BLVD. STREET ADORESS 1.3 STREET ADDRESS **CLEARWATER FL 33759** CITY-ST-ZIP 1.4 CITY-ST-ZIP ☐ Addition DELETE Change 2.1 TITLE TITLE NAME 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Addition 3.1 TITLE TITLE 3.2 NAME NAME STREET ADDRESS **33 STREET ADDRESS** 3.4. CiTY-ST-ZIP CITY-ST-ZIP Change TITLE DELETE 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE 5.1 TITLE Change Addition TITLE NAME 52 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY-ST-ZIP Addition DELETE Change TITLE 6 1 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 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 or an attachment with an address.