## 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 # P97000107255 (6)

FSX SERVICES, INC.

## FILED Feb 09 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 1794 PALO ALTO AVE 1734 PALO ALTO AVE LADY LAKE FL 32159 LADY LAKE FL 32159 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/22/1997 Applied For 2. Principal Place of Business 2a. Mailing Address
26 Same Control 4. FEI Number 21 Not Applicable Suite, Apt. #, etc. \$8.75 Additional **B**′ 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 28 Added to Fees Country 8. This corporation owes or has paid the current year Intangible Yes **₽**No 29 Personal Property Tax due June 30. 30 Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 61 GWYNNE, VERNON D Name 1734 PALO ALTO AVE **B2** Street Address (P.O. Box Number is Not Acceptable) LADY LAKE FL 32159 83 City 84 **B5** 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 larger with, and accept the obligators of, Section 607.0505, Florida Statutes. RNON OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13 DELETE Addition ☐ Change TITLE 1.1 TITLE GWYNNE, VERNON D NAME **1.2 NAME** 1734 PALO ALTO AVE STREET ADDRESS 1.3 STREET ADDRESS LADY LAKE FL 32159 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 1/116 MATTHEWS, GARY NAME 2.2 NAME 1705 MEADOWGATE STREET ADDRESS 2.3 STREET ADDRESS LADY LAKE FL 32159 CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Addition TITLE 3 1 TITLE Change NAME SPENCER, ROBERT 3.2 NAME C/O PAC 82 - P O BOX 37301 STREET ADDRESS 3.3 STREET ADDRESS WASHINGTON DC 20013-7301 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 CITY-ST-ZIP 4.4 CITY-ST-7IP DELETE 5.1 TITLE Change Addition TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY - \$1 - ZIP DELETE Addition TITLE 6.1 TITLE 30000242657 NAME 6.2 NAME -02/10/98--01037--033 STREET ADDRESS 6.3 STREET ADDRESS \*\*\*163.75 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 eath; 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 chapted, or on an attachment with an address.

SIGNATURE: 4

VERNON D. GWYNIX

2/2/08 362204244

CR2E034 (10/97)