SECOND NOTICE; CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED Jul 16 1998 8:00am PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS **DOCUMENT #** P97000108394 (2) 1. Corporation Name ACI DIRECT, INC. Principal Place of Business Mailing Address 4505 18TH ST. EAST 4505 18TH ST. EAST **BRADENTON FL 34203 BRADENTON FL 34203** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u> 12/26/1997</u> 2. Principal Place of Business 2a. Mailing Address Applied For 65-0806 21 26 Not Applicable Suite, Apt. #, etc. Sulte, 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 23 Trust Fund Contribution 28 Added to Fees Zip 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No Zip Country Country 24 Personal Property Tax due June 30. 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name SHEA, JOHN J JR 630 S. ORANGE AVE., #300 Street Address (P.O. Box Number is Not Acceptable) SARASOTA FL 34236 B3 R4 City Zip Code 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) CR2E034 (5/98 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 1.1 TITLE Change Addition PANUCE, DONALD G NAME 1.2 NAME 4505 18TH ST. EAST 1.3 STREET ADDRESS STREET ADDRESS **BRADENTON FL 34203** CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE DELETE 2.1 TITLE ___ Change ___ Addition NAME **PANUCE, MARSHA R** 2.2 NAME STREET ADDRESS **450**5 18TH ST. EAST 2.3 STREET ADDRESS CITY-ST-ZIP <u>Bradenton FL 34203</u> 2.4 CITY-ST-ZIP TITLE 3.1 TITLE DELETE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP TITLE DELETE 4.1 TITLE ___ Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE 61 TITLE __ DELETE Change Addition NAME 6.2 NAME

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.

6.3 STREET ADDRESS

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

941-746-3221