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

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PROFIT CORPORATION ANNUAL REPORT

~~1999~~ 2000

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
00 APR 24 PM 1:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P98000033422

Corporation Name
MAYWOOD, INC.

[redacted]

Principal Place of Business	Mailing Address
LAKE ISIS AVE. PARK FL 33825	709 LAKE ISIS AVE. AVON PARK FL 33825

DO NOT WRITE IN THIS SPACE

Principal Place of Business	2a. Mailing Address
Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
City & State	27 City & State
Zip / Country [25]	28 Zip / Country [29] [30]

3. Date Incorporated or Qualified: 04/10/1998

4. FEI Number: 65-0851349 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

MAY, PHILLIP B
709 LAKE ISIS AVE.
AVON PARK FL 33825

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable) 100003239211--9

83 -05/04/00--01022--018 ****150.00 ****150.00

84 City FL 85 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.

Phillip B. May — JANUARY 4, 1999

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
☐ DELETE	11 TITLE: PRESIDENT — ☐ Change ☒ Addition
	12 NAME: PHILLIP B. MAY
ADDRESS	13 STREET ADDRESS: 709 LAKE ISIS AVE
ST-ZIP	14 CITY-ST-ZIP: AVON PARK, FL 33825
☐ DELETE	21 TITLE: VICE PRESIDENT — ☐ Change ☒ Addition
	22 NAME: ROBERT M. PHILLIPS
ADDRESS	23 STREET ADDRESS: 17011 TARPON WAY RD.
ST-ZIP	24 CITY-ST-ZIP: N. FORT MYERS, FL 33917
☐ DELETE	31 TITLE: SECRETARY/TREASURER — ☐ Change ☒ Addition
	32 NAME: WOODFORD W. MAY
ADDRESS	33 STREET ADDRESS: 1901 PASSAIC AVE
ST-ZIP	34 CITY-ST-ZIP: FORT MYERS, FL 33901
☐ DELETE	41 TITLE — ☐ Change ☐ Addition
	42 NAME
ADDRESS	43 STREET ADDRESS
ST-ZIP	44 CITY-ST-ZIP
☐ DELETE	51 TITLE — ☐ Change ☐ Addition
	52 NAME
ADDRESS	53 STREET ADDRESS
ST-ZIP	54 CITY-ST-ZIP
☐ DELETE	61 TITLE — ☐ Change ☐ Addition
	62 NAME
ADDRESS	63 STREET ADDRESS: SP
ST-ZIP	64 CITY-ST-ZIP: 4/20/2000

Phillip B. May

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, with all other like empowered.

SIGNATURE: Phillip B. May PHILLIP B. MAY 1/4/99 941-453-4029

CR2E034 (11/98)