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

Apr 24 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State **DIVISION OF CORPORATIONS** 1998 DOCUMENT # (6) DAMES POINT CROSSING, INC. Principal Place of Business Mailing Address 2647 CESERY BLVD. 2647 CESERY BLVD. JACKSONVILLE FL 32211 JACKSONVILLE FL 32211 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/28/1990 2. Principal Place of Business 2a. Mailing Address 4, FEI Number Applied For 6132 Merrill Rd. 59-3031546 6132 Merrill Rd. Not Applicable Suite, Apt. #, otc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired #12 #12 Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Jacksonville, Fl Jacksonville, Fl \Box 23 Trust Fund Contribution Added to Fees Zip Country This corporation owes or has paid the current year Intangible 32211 Personal Property Tax due June 30. ☐ Yes 24 26 29 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 Name CESERY, JR. W R. 647 CESERY BLVD. Street Address (P.O. Box Number is Not Acceptable) 6132 Merrill Rd. #12 82 JACKSONVILLE FL 32211 83 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 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, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE SIGNATURE Signature, typoid or pented name of mystered agent and title it applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE TITLE 1.1 TITLE Change Addition CESERY, WILLIAM R., JR. NAME 12 NAME 2647 CESERY BLVD. 6132 Merrill Rd. #12 STREET ADDRESS 1.3 STREET ADDRESS JACKSONMLLE FL 1.4 CITY-ST-ZIP Jacksonville, Fl. CITY-ST-ZIP DELETE TITLE 2.1 TITLE TAYLOR, MARTHA C NAME 2.2 NAME 2647 CESERY BLVD. 1415 Palm Avenue STREET ADDRESS 2.3 STREET ADDRESS JACKSONVILLE FL Jacksonville, Fl. 32207 CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE **X** Change Addition TITLE 3 1 TITLE CESERY, BARBARA H 3.2 NAME NAME 2647 CESERY BLVD STREET ADDRESS 3.3 STREET ADDRESS 6132 Merrill Rd. #12 JACKSONVILLE FL CITY-ST-ZIP 3.4. CITY-ST-ZIP Jacksonville, Fl. DELETE 4.1 TITLE TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 City - ST-7IP CITY-ST-ZIP DELETE 5.1 TITLE Change ☐ Addition TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Addition Change TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** City-St-7/P 14. Thereby 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 arrival 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.

(e)illian R Copen Va

SIGNATURE:

FILED