FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE

APPROVED AND FILED

95 MAY -1 PM 9:15

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # S17055 (2)

1. Corporation Name: TREVOR PROPERTIES, INC.

Principal Place of Business	Mailing Address
9116 MOSSY OAK LANE CLERMONT FL 34711-6855	9116 MOSSY OAK LANE CLERMONT FL 34711-6855

3. Date Incorporated or Qualified: 12/07/1990
3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-0723751 — 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 has issues for ... Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 307 N. Hwy 27	26 307 N. Hwy 27
Suite, Apt. # etc. 22	Suite, Apt. # etc. 27
City & State 23 Clermont, Fl	City & State 28 Clermont, FL
Zip 24 34711 — County 25 LAKE	Zip 29 34711 — County 30 LAKE

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
BROCKIE, SCOTT 9116 MOSSY OAK LANE CLERMONT FL 34711	81 Name: Patricia F. Roubal 82 Street Address (P.O. Box Number is Not Acceptable): 11703 LAKE SUSAN CT. 83 84 City: Clermont FL 85 Zip Code: 34711

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: [signature] Patricia F. Roubal 6-1-95

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
TITLE	PST	TITLE	PST	☒ Change ☐ Addition
NAME	BROCKIE, SCOTT	NAME	TOM TWIEG	
STREET ADDRESS	9116 MOSSY OAK LANE	STREET ADDRESS	5305 W. Clinton Ave	
CITY-ST-ZIP	CLERMONT FL	CITY-ST-ZIP	Milwaukee, Wi 53223	
TITLE	VP	TITLE	VP	☒ Change ☐ Addition
NAME	COMPTON, MARK D	NAME	Brian TWIEG	
STREET ADDRESS	11725 LAKE CLAIR CIR.	STREET ADDRESS	6305 W. Clinton Ave.	
CITY-ST-ZIP	CLERMONT FL	CITY-ST-ZIP	Milwaukee, Wi 53223	
TITLE		TITLE		☐ Change ☐ Addition
NAME		NAME		
STREET ADDRESS		STREET ADDRESS		
CITY-ST-ZIP		CITY-ST-ZIP		
TITLE		TITLE		☐ Change ☐ Addition
NAME		NAME		
STREET ADDRESS		STREET ADDRESS		
CITY-ST-ZIP		CITY-ST-ZIP		
TITLE		TITLE		☐ Change ☐ Addition
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CITY-ST-ZIP		CITY-ST-ZIP		
TITLE		TITLE		☐ Change ☐ Addition
NAME		NAME		
STREET ADDRESS		STREET ADDRESS		
CITY-ST-ZIP		CITY-ST-ZIP		

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07, 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.

SIGNATURE: [signature] Tom Twieg 5-1-95 1-414-355-1559

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — Daytime Phone #

0374301 CP