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

NAME

STREET ADDRESS

SIGNATURE

14. I hereby certify that the information supplied with this filing does not qualify indicated on this annual report or supplemental annual report is true and a officer or director of the corporation or the receiver or trustee empowered Block 12 or Block 13 if changed, or on an attachment with an address.

CITY-ST-ZIP

FILED FLORIDA DEPARTMENT OF STATE CORPORATION Jan 22 1998 8:00am Sandra B. Mortham ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS Secretary of State DOCUMENT # S77318 (1)DECKS AND DOCKS LUMBER COMPANY Principal Place of Business Mailing Address 4801 - 95TH ST., N. 4801 - 94TH ST., N. ST. PETERSBURG FL 33708 ST. PETERSBURG FL 33708 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/03/1991 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-3084131 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 HAMILTON, JOHN R. 1304 PASS-A-GRILL Street Address (P.O. Box Number is Not Acceptable) ST, PETERSBURG BEACH FL 33706 83 84 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 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 Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE DP Change Addition NAME HAMILTON, JOHN R. 1.2 NAME 1304 PASS A GRILLE WAY STREET ADDRESS 1.3 STREET ADDRESS ST. PETE BEACH FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE Change Addition HAMILTON, LINDA L. NAME 2.2 NAME STREET ADDRESS 1304 PASS A GRILLE WAY 2.3 STREET ADDRESS ST. PETE BEACH FL CITY-ST-ZIP 2.4 CITY-ST-ZIP 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-7IP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6.1 TITLE ☐ Change Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST-ZIP

fy for the exemption stated in Section 119.07(3)(i), Fiorida Statutes. I further certify that the information accurate and that my signature shall have the same legal effect as if made under oath; that I am an to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

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