

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

FILED
May 11 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra R. Morsham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **S87787** (5)
1. Corporation Name
FEAGIN PROPERTIES, INC.



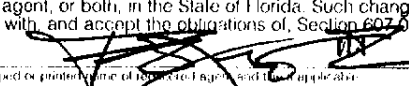
Principal Place of Business 440 MORRIS RD. MONTICELLO FL 32344	Mailing Address 440 MORRIS RD. MONTICELLO FL 32344
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 10/17/1991	
2. Principal Place of Business 315 S. Calhoun St.	2a. Mailing Address Post Office Drawer 810
21 Suite, Apt. #, etc. Suite 600	26 Suite, Apt. #, etc. Suite 600
22 City & State Tallahassee, FL	27 City & State Tallahassee, FL
23 Zip 32301	28 Zip 32302
24 Country USA	29 Country USA
4. FEI Number 59-3091591	
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 or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No	

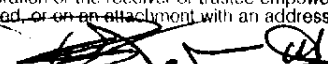
9. Name and Address of Current Registered Agent MILLER, G. ULMER 440 MORRIS RD. MONTICELLO FL 32344		10. Name and Address of New Registered Agent Robert R. Feagin, III 315 S. Calhoun St., Suite 600 Tallahassee, FL 32301	
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11. Pursuant to the provisions 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  DATE **4/30/98**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	TD	1.1 TITLE	☐ Change ☐ Addition
NAME	MILLER, G. ULMER	1.2 NAME	
STREET ADDRESS	440 MORRIS RD.	1.3 STREET ADDRESS	
CITY-ST-ZIP	MONTICELLO FL	1.4 CITY-ST-ZIP	
TITLE	DS	2.1 TITLE	☐ Change ☐ Addition
NAME	MILLER, MORRIS H	2.2 NAME	
STREET ADDRESS	1117 LASSWADE	2.3 STREET ADDRESS	
CITY-ST-ZIP	TALLAHASSEE FL	2.4 CITY-ST-ZIP	
TITLE	DP	3.1 TITLE	☒ Change ☐ Addition
NAME	FEAGIN, ROBERT R., III	3.2 NAME	Robert R. Feagin, III
STREET ADDRESS	315 S CALHOUN	3.3 STREET ADDRESS	315 S. Calhoun Street, Suite 600
CITY-ST-ZIP	TALLAHASSEE FL	3.4 CITY-ST-ZIP	Tallahassee, FL 32301
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	800002523708
CITY-ST-ZIP		5.4 CITY-ST-ZIP	-05/14/98--01083--018
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	***150.00
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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.

SIGNATURE  DATE **4/21/98 (REV) 4255513**

CR2E034 (10/97)