FILE NOW: FILING FEE AFTER MAY 1ST IS \$1.00

Apr 15 1998 8:00am FLORIDA DEPARTMENSTATE CORPORATION Sandra B. Mon Secretary of State ANNUAL REPORT Secretary of St DIVISION OF CORPONS 1998 DOCUMENT # S91513 (9)MACO PROPERTIES, INC. Principal Place of Business Mailing Address 1646 ROGERO RO 1646 ROGERO RD JACKSONVILLE FL 32211 JACKSONVILLE FL 32211 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/01/1991 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3100414 Not Applicable Suite, Apt. #, etc. Suite Apt. #. etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Ζιp 4 8. This corporation owes or has paid the current year Intangible 30 24 29 Personal Property Tax due June 30. 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name Yarbrough, Michael 1646 ROGERO RD Street Address (P.O. Box Number is Not Acceptable) JACKSONVILLE FL 32211 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the 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 authory 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 Ss. SIGNATURE Signature, typed or printed name of registered agent and title it applicable. (NOTE: Registert signature required when reinstating) DATE CR2E034 (10/97 OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE Change YARBROUGH, MICHAEL NAME 1646 ROGERO RD STREET ADDRESS 17 ADDRESS JACKSONVILLE FL CITY-ST-ZIP SiT-ZIP DELETE Change Addition TITLE YARBROUGH, MICHAEL NAME 2: 1646 ROGERO RD 2: ADDRESS STREET ADDRESS JACKSONVILLE FL CITY-ST-ZIP 2.5T-ZIP DELETE Change Addition TETLE 3. THOMPSON, TIMOTHY NAME 3.2 1646 ROEGRO RD STREET ADDRESS 3.3ADDRESS JACKSONVILLE FL CITY-ST-ZIP 3.4T-ZIP DELETE TITLE 4.1 ☐ Change Addition NAME 4. 2 STREET ADDRESS 4 34DDRESS CITY-ST-ZIP DELETE Change Addition TITLE 5.1 NAME 5.2 STREET ADDRESS 53 VDDRESS CITY-ST-ZIP TITLE DELETE Change Addition 6.1 6.2

6.3 VDDRESS 6.4 - ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the elon 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 at 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 executeeport as required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE:

STREET ADDRESS

Muhael

Block 12 or Block 13 if changed, or on an attachment with an address.

4/9/98

904-745-0045

FILED