| SUID. Apt. #, etc.       Suid. Apt. #, etc.       F. Certificate of Status Desired       \$8,75 Additional Fee Required         City & State       City & State       E. Election Campaign Financing       Added to Fees         20       Zip       Zip       Country       E. This corporation has balaitly for inangible fax under a 199 032.         30       Final States       Inange and Address of Current Registered Agent       10. Name and Address of New Registered Agent         SchMOLLING, WOLFGANG       91       Name       10. Name and Address of New Registered Agent         SchMOLLING, WOLFGANG       91       Name       10. Name and Address of New Registered Agent         SchMOLLING, WOLFGANG       91       Name       10. Name and Address of New Registered Agent         SchMOLLING, WOLFGANG       91       Name       10. Name and Address of New Registered Agent         SchMOLLING, WOLFGANG       91       Name       10. Name and Address of New Registered Agent         SchMOLLING, WOLFGANG       92       Street Address (P.O. Box Number is Not Acceptable)       93         MARCO ISLAND FL 33937       93       94       City Coll       FL       95         SchMOLLING, WOLFGANG       93       94       City Coll       94       94       94         SchMOLLING, WOLFGANG       101   | MARCO ISLAND INVESTMENT & PROPERTY MANAGEMENT, I<br>NC.   | CORF<br>ANNU/   | ROFIT<br>PORATION<br>AL REPORT<br><b>1997</b>                             |  | Sandra B.<br>Secretar   | TMENT OF STATE<br>Mortham<br>y of State<br>ORPORATIONS   | Jan 30 1  | TILED<br>9978:<br>ary of  |   |
|--|---|---|---|--|---|--|---|---|---|
| Maring Address       Maring Address         Starting Address       13 BanNoUE GT<br>MARCO ISLD FL 3445 222 US         Principal Place of Business       24. Maring Address         State, Apl 4, etc       24. Maring Address         State, Apl 4, etc       5.         State, Apl 4, etc       5.         Chy & State       6. Conflored         State, Apl 4, etc       5.         Chy & State       6. Conflored         State, Apl 4, etc       5.         Chy & State       6. Conflored         State, Apl 4, etc       5.         State, Apl 4, etc       7.         State, Apl 4, etc       10.         State, Apl 4, etc  | Marco Alderso         Marco Adderso           128 Markovick Gr<br>MARO SLD FL 33837         128 Markovick Gr<br>MARO SLD FL 33827         3. Date Incorporated or Qualified<br>QD 1/1896         3. Date Incorporated or QUI  | MARCO IS  |   |  |   | π, ι   |   |   |   |
| NARCO ISLD FL 39107         MARCO ISLD FL 39145222         Is. Date Incorporated or Qualified         3t. Date Incorporated or Qualified         St. Date Incorporated or Qualified         St. Date Incorporated or Qualified         Applicable of Leaves           Scher, April 7, etc.         22         Scher, April 7, etc.         23         Country         8. Cells for Date Incorporated or Qualified         Scher, April 24         Applicable           219         220         Country         8. The Report of Date Incorporated or Qualified or Qualified or Qualified         Marce Incorporated or Qualified or Qualified         Marce Incorporated or Part Provide         Marce Incorporated or Part Part Part Part Part Part Part Par   | Sco BLD FL 3987         MARCO ISLD FL 3945222         St. Date Incorporated or Cualified         St. Date Incorporated or Cu  | incipal Place   | of Business   | Mail   | ing Address   |  |   | I BIHII QIDII BIDII BIHII KI  | UL UJUH (ULI  |
| Principal Place of Business     Principal Place of Place Place     Principal Place of Business     Principal Place of Place Place     Principal Place of Place Place Place     Principal Place of Place Place Place     Principal Place P  | Construction of the comparison of the compa   |   |   | MARC   |   | 2  |   |   |   |
| Principal Place of Busivers         Zav. Making Address         4. FEI Number         Applicable           Suito, Apl. #, etc.         25         Suito, Apl. #, etc.         5. Conflicted of Status Desired         \$8.75 Additional<br>Fall Applicable           City & State         21         City & State         5. Conflicted of Status Desired         \$8.75 Additional<br>Fall Applicable           City & State         21         City & State         5. Conflicted of Status Desired         \$8.75 Additional<br>Fall Applicable           City & State         23         24         Country         8. The cooporation Campaign Financing<br>Trait Fund Control Instaliability for intangible state<br>(Camp Financing)         5.00 May Be<br>Mice Control Instaliability for intangible state<br>(Camp Financing)         5.00 May Be<br>Mice Control Instaliability for intangible state<br>(Camp Financing)         7.00 May Be<br>Mice Control Instaliability for intangible state<br>(Camp Financing)         5.00 May Be<br>Mice Control Instaliability for intangible state<br>(Camp Financing)         7.00 May Be<br>Mice Control Instaliability for intangible state<br>(Camp Financing)         7.00 May Be<br>Mice Control Instaliability for intangible state<br>(Camp Financing)         7.00 May Be<br>Mice Control Instaliability for intangible state<br>(Camp Financing)         7.00 May Be<br>Mice Camp Financing)         7.00 May Financing   | Principal Place of Business     Za.     Maining Address     A. FEI Number     Applied For       Suite, Apr. 4, 66:     Za     Status Orsite   |   |   |  |   |  | · · ·   |   |   |
| Suite. Apl. #, etc.     Fas. Required       Chy & State     Chy & State     Chy & State     E. Election Campaign Financing     \$5.00 May Be.       20     21     20     20     Tust Fund Contribution     Address of Address of Address of Current Registered Agent       30     9. Name and Address of Current Registered Agent     10. Name and Address of Current Registered Agent     91       SchMOLLING, WOLFGANG<br>S61 KENDALL DR<br>MARCO ISLAND FL S3637     91     Name     10. Name and Address of Current Registered Agent       11. Purcent to the providence for the providence f   | Sufer, Apr. #, etc.     Sufer, Apr. #, e  | Principal Pla   | nce of Business   |  | Mailing Address   |  | 4. FEI Number   |   | Applied For   |
| City & State       City & State       6. Bettor Comparison Financing       \$5.000 May Bettor         2ip       Zip       Country       8. This corporation has liability for intangible tax under is 198 032.   | Cri y & Since Cr  | Suite, Apt #  | r, etc  |  | Suite, Apt. #, etc.   | ······································   |   | FT \$8.7  | 5 Additional  |
| ZPD       Country       2:0       Country       4. This coprovation has lability for intangible tax under a 199.032.         S. Name and Address of Current Registered Agent       10. Name and Address of Current Registered Agent       10. Name and Address of Num Registered Agent         SCHMOLLING, WOLFGANG<br>SGI KENDALL DR<br>MARCO ISLAND FL 33937       11. Name and Address of Number is Not Acceptable)         B       20       20       Cluv         B       21       Name and Address of Current Registered Agent       11. Name and Address of Num Registered Agent         Schwideling       Schwideling       12       Name and Address of Number is Not Acceptable)         MARCO ISLAND FL 33937       12       12       Schwideling       12         10. Name and Address of Core of Schwide Agent Statutes, find above harmed corporation is board of directors. Thereby accept he agont mate registered agent and not accept he agont mate registered agent and not accept he agont mate registered agent and not accept he agont mate registered agent  | 200<br>3 4/1 4/5       Country<br>230       200<br>200       Country<br>230       200<br>200       Country<br>230       8. The coparation has lability to praciple is under a 198 032.<br>Florida Statutes       Prode Statutes       8. The coparation has lability to praciple is under a 198 032.<br>Florida Statutes         Sch MoulLING, WOLFGANG<br>651 KENDALL OR<br>MARCO ISLAND FL 33937       91       Name       10. Hans and Address of New Registered Agent         80       64 City       FL       651 KENDALL OR<br>MARCO ISLAND FL 33937       91       Name         80       64 City       FL       650 KENDALL OR<br>MARCO ISLAND FL 33937       FL       650 KENDALL OR<br>MARCO ISLAND FL 33937         80       64 City       FL       650 KENDALL OR<br>MARCO ISLAND FL 33937       FL       650 KENDALL OR<br>MARCO ISLAND FL 33937         80       FL       corrected coperation submits this statement for the purpose of changing its registered<br>office or registered agency training the registered<br>office or   | City & State  |   | (  | City & State  |  |   | \$5.0   | 00 May Be   |
| S. Name and Address of Current Registered Agent     SchHOLLING, WOLFGANG     Sch KENALD R     MARCO ISLAND FL 33937     Soft KENALD     Schwarz hur his provision sport of force, soft and control of the provision sport of directors. Thereby accept he appointment is registered     defect registered Agent softwarzer hur his provision sport of directors. Thereby accept he appointment is registered     defect registered Agent softwarzer hur his provision sport of directors. Thereby accept he appointment is registered     defect registered Agent softwarzer hur his provision sport of directors. Thereby accept he appointment is registered     defect registered Agent softwarzer hur his provision sport of directors. Thereby accept he appointment is registered     defect registered Agent softwarzer hur his provision sport of directors. Thereby accept he appointment is registered     defect registered Agent softwarzer hur his provision sport of directors. Thereby accept he appointment is registered     defect registered Agent softwarzer hur his provision sport of directors. Thereby accept he appointment is registered     defect registered Agent softwarzer hur his provision sport of directors. Thereby accept he appointment is registered     defect registered Agent softwarzer hur his provision sport of directors. Thereby accept he appointment is registered     defect registered Agent softwarzer hur hereby accept he appointment is registered     defect registered Agent softwarzer hur hereby accept he appointment is registered     defect registered Agent softwarzer hur hereby accept he appointment is registered     defectors. Thereby accept hereby acc  | B. Name and Address of Current Registered Agent     SchMolLING, WOLFGANG     Sch KenDalL OR     MARCO ISLAND FL 33937     Soft KENDALL OR     MARCO ISLAND FL 33937     Soft KENDALL OR     Sch KenDalL OR     MARCO ISLAND FL 33937     Soft KENDALL OR     Sch KenDalL OR     MARCO ISLAND FL 33937     Soft KENDALL OR     Sch KenDalL OR     MARCO ISLAND FL 33937     Soft KENDALL     Sch KenDalL OR     Sch KenDalL     Sch KenDal     Sch KenDalL     Sch KenDal     Sch KenDal     Sch KenDalL     Sch KenDal     Sch     Sch KenDal     Sch     Sch KenDal     Sch     Sch KenDal   | Zip   | Count   |  | Zip   | Country  |   |   |   |
| SCHMOLLING, WOLFGANG<br>S61 KENDALL DR<br>MARCO ISLAND FL 33937     91     Name       1.     Pursuer In the processory II Sectors 607 0502 and 607 1508. Fordel Statutes, the above named corporation submits this statement for the purpose of changing its registered<br>agent. Lam familier with and or program of the statement for the purpose of changing its registered<br>agent. Lam familier with and or program of the statement for the purpose of changing its registered<br>agent. Lam familier with and or program of the statement for the purpose of changing its registered<br>agent. Lam familier with and or program of the statement for the purpose of changing its registered<br>agent. Lam familier with and or program of the statement for the purpose of changing its registered<br>agent. Lam familier with and or program of the statement for the purpose of the popolitic statement<br>agent. Lam familier with and or program of the statement<br>of the purpose of changing its registered<br>agent. Lam familier with and of the statement<br>of the purpose of changing its registered<br>agent. Lam familier with and of the statement<br>of the purpose of changing its registered<br>agent. Lam familier with and of the statement<br>of the purpose of changing its registered<br>agent. Lam familier with and the statement<br>of the purpose of the purpose of changing its registered<br>agent. Lam familier with and the statement<br>of the purpose of the purpose of the purpose of the program<br>agent. Lam familier with a statement agent age  | SCHMOLLING, WOLFGANG<br>S61 KENDALL DR<br>MARCO ISLAND FL 33937       91       Name         Puscant for the provision of Schwart Formation Schwart for the provision of the pro   | 3414  | [23]  |  |   | 30]  |   |   |   |
| MARCO ISLAND FL 33937       B3         I. Pursuant for the provisions of Sectors 607 0502 and 607.1508, Florids Statutes, the above named corporation submits this statement for the purpose of changing its registered agency of purpose of the corporation's board of directors. Investor purpose of changing its registered agency of purpose of changing its registered agency of purpose of purpose of changing its registered agency of purpose of changing its registered agency of purpose of changing its registered agency of purpose of changes its registered agency of purpose agency of purpose of changing its registered agency of purpose of changes its registered agency of purpose of changes its registered agency of purpose agency   | MARCO ISLAND FL 33937   |   |   | NG   |   | 81 Name  |   | <u> </u>  | <u>.</u>  |
| Pursuant for the processory of Sections 607 0502 and 607 1508 Florida Statutes against ended corporation submits this statement for the purpose of changing its registered against vertice or registered again vertice or registered against vertice or registered against vere  |   |   |   |  |   | 82 Street Add  | tress (P.O. Box Number is Not Accept  | able)   |   |
| Pursuent for the processing is Sections 607 0502 and 607 1508, Fordal Statutes, the above named corporation submits this statement for the purpose of changing its registered agent. Lant taret and the purpose of change was authorized by the corporation's board of directors. I hareby accept the appointment as registered agent. Lant taret and the purpose of change was authorized by the corporation's board of directors. I hareby accept the appointment as registered agent. Lant taret and the purpose of change was authorized by the corporation's board of directors. I hareby accept the appointment as registered agent. Lant taret and the purpose of change was authorized by the corporation's board of directors. I hareby accept the appointment as registered agent. Lant taret application. OCFEDE: Find Statutes. The application of 20 505. Find as statutes was reacted agent and the application of 20 505. Find as statutes was reacted agent and the application of 20 505. Find as statutes was reacted agent and the application of 20 505. Find as statutes was reacted agent and the application of 20 505. Find as statutes was reacted agent and the application of 20 505. Find as statutes was reacted agent and the application of 20 505. Find as statutes was reacted agent and the application of 20 505. Find as statutes was reacted agent and the application of 20 505. Find as statutes was reacted agent and the application of 20 505. Find as statutes was reacted agent and the application of 20 505. Find as statutes was reacted agent agent and the application of 20 505. Find as statutes was reacted agent age  | Pursuant to the provision of Bechons 607 0502 and 607.1508, Fibrida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent. Test functions of become of 25055, Fibrida Statutes, the above named corporation's board of directors. I hereby accept the appointment as registered agent. Test functions of become of 25055, Fibrida Statutes, the above named corporation's board of directors. I hereby accept the appointment as registered agent. Test functions of become of 25055, Fibrida Statutes, the above named corporation's board of directors. I hereby accept the appointment as registered agent and the originate and appoint agent and the corporation's board of directors. I hereby accept the appointment as registered agent agent and the corporation's board of directors. I hereby accept the appointment as registered agent agent and the corporation's board of directors. I hereby accept the appointment as registered agent agent and the corporation's board of directors. I hereby accept the appointment as registered agent agent and the corporation's board of directors. I hereby accept the appointment as registered agent agent and the corporation's board of directors. I hereby accept the appointment as registered agent agent agent and the appoint agent   | MARC  | O ISLAND FL 3393  | 57   |   | 83   |   |   |   |
| I. Provide Comparison of Section 207 602 and 607 1508, Frieida Statutes, the above hand do directors. I hereby accept the appointment as registered offere or opportations baard directors. I hereby accept the appointment as registered agent. Left Bartier of the purpose of changing its registered agent. Left Bartier of the purpose of changing its registered agent. Left Bartier of the purpose of changing its registered agent contractions baard directors. I hereby accept the appointment as registered agent comparison beard directors. I hereby accept the appointment as registered agent contractions beard and directors. I hereby accept the appointment as registered agent contractions beard directors. I hereby accept the appointment as registered agent comparison beard directors. I hereby accept the appointment as registered agent contractions beard directors. I hereby accept the appointment as registered agent contractions beard directors. I hereby accept the appointment as registered agent contractions beard agent contractions beard and accept the appointment as registered agent contractions beard agent agent and accept the appointment as registered agent contractions beard agent agent and accept the appoint agent agent agent and and accept the appoint agent age  | Proceedings of the proceeding of Sections 607 6502 and 607 1508. Florida Statutes, the above named corporation submit this statement for the purchase of barry of the registered agence of the intervention of the corporation's board of directors. I hereby accept the appointment as registered agence of the intervention of the corporation's board of directors. I hereby accept the appointment as registered agence of the corporation's board of directors. I hereby accept the appointment as registered agence of the corporation's board of directors. I hereby accept the appointment as registered agence of the corporation's board of directors. I hereby accept the appointment as registered agence of the corporation's board of directors. I hereby accept the appointment as registered agence of the corporation's board of directors. I hereby accept the appointment as registered agence of the corporation's board of directors. I hereby accept the appointment as registered agence of the corporation's board of directors. I hereby accept the appointment as registered agence of the corporation's board of directors. I hereby accept the appointment as registered agence of the corporation's board of directors. I hereby accept the appointment as registered agence of the corporation's board of directors. I hereby accept the appointment as registered agence of the corporation's board of directors. I hereby accept the appointment as registered agence of the corporation's board of directors. I hereby accept the appoint as registered agence of the corporation's board of directors. I hereby accept the appoint as registered agence of the corporation's board of directors. I hereby accept the appoint as registered agence of the corporation's board of directors. I hereby accept the appoint as registered agence of the corporation's board of directors. I hereby accept the appoint as registered agence of the corporation's board of directors. I hereby accept the appoint as registered agence of the corporation's board of directors. I hereby accept th   |   |   |  |   |  |   |   |   |
| NUMETON     Separation and Public Transmission     (MOTE Registered Agent dipolation required when revoluting)     (Mote The Constraint)       2.     CEFT CERS AND DIRE CTORS     13.     ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12       1.E     DELETE     1.1 TITLE     DELETE     1.1 TITLE       Schwolling, Wolkgang     13 STREET ADDRESS     13.     ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12       1.RE ADDRESS     1.1 TITLE     DELETE     1.1 TITLE       WARCO ISLAND FL     3.4 I.4 ST     1.4 CITY-ST-ZIP       1.RE ADDRESS     1.2 MAME     2.2 MAME       REET ADDRESS     1.2 STREET ADDRESS       1.TT.ST-ZIP     DELETE     2.1 TITLE       1.RE ADDRESS     2.2 STREET ADDRESS       1.TS-ST-ZIP     DELETE     3.1 TITLE       1.TS-ST-ZIP     2.4 CITY-ST-ZIP       1.RE ADDRESS     3.2 STREET ADDRESS       1.TS-ST-ZIP     3.4 CITY-ST-ZIP       1.TE ADDRESS     3.3 STREET ADDRESS       1.TY-ST-ZIP     3.4 CITY-ST-ZIP       1.TA ADDRESS     3.3 STREET ADDRESS       1.TY-ST-ZIP     3.4 CITY-ST-ZIP       1.TA ADDRESS     3.3 STREET ADDRESS       1.TY-ST-ZIP     3.4 CITY-ST-ZIP       1.TA ADDRESS     3.3 STREET ADDRESS       1.TY-ST-ZIP     1.1 TITE       1.TA ADDRESS     3.3 STREET   | UN VOIC     Signate: and University and applied that it is proteine     (VOIT: Registered Agent signature sequence when remetation)     Voit: E       CFL de RS AND DIRECTORS     13.     ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12       Viet     DELETE     11 TITLE       SEE ADDISS     S51 KENDALL DR     13 STREET ADDRESS       Vist 200     ARCO ISLAND FL     3 4 1 4 5       Vist 200     DELETE     21 TITLE       Vist 200     DELETE     31 TITLE       Vist 200   |   |   |  |   |  | <u></u>   | 85 Z  | ip Code   |
| NON-YOLD       Separate type of the processory of the property of the  | UN VOIC     Signate: and University and applied that it is proteine     (VOIT: Registered Agent signature sequence when remetation)     Voit: E       CFL de RS AND DIRECTORS     13.     ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12       Viet     DELETE     11 TITLE       SEE ADDISS     S51 KENDALL DR     13 STREET ADDRESS       Vist 200     ARCO ISLAND FL     3 4 1 4 5       Vist 200     DELETE     21 TITLE       Vist 200     DELETE     31 TITLE       Vist 200   | Durqueet to   |   | Viene 607 0602 and 607   | 2 1609 Florido Ptotuto  | <b>84</b> City   | negation submits this statement for the   |   | ip Code<br>4145   |
| 2.       OFFICERS AND DIRECTORS       13.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12         ILE       PT       DELETE       1.11TLE       Change       Addition         AME       SCHMOLLING, WOLKGANG       1.3 STREET ADDRESS       1.3 STREET ADDRESS       Addition         SECH ADDRESS       SET KENDALL DR       1.3 STREET ADDRESS       1.3 STREET ADDRESS       I.4 GMY ST-2/P         TLE       DELETE       2.1 TILE       2.1 AME       Change       Addition         MARCO ISLAND FL       3.4 / 4 5       1.2 NAME       2.3 STREET ADDRESS       I.4 GMY ST-2/P         TLE       DELETE       2.1 TILE       Change       Addition         MARCO ISLAND FL       3.4 / 4 5       1.4 GMY ST-2/P       I.4 GMY ST-2/P         TLE       DELETE       2.1 TILE       2.1 AME       I.4 GMY ST-2/P         TLE       DELETE       3.1 TILE       I.4 GMY ST-2/P       I.4 GMY ST-2/P         TLE       AAK       4.2 NAME       4.3 STREET ADDRESS       I.4 GMY ST-2/P         TLE       DELETE       5.1 TITLE       Change       Addition         AAK       4.2 NAME       4.2 NAME       I.4 GMY ST-2/P       I.4 GMY ST-2/P         TLE       DELETE       5.1 TITLE       Change   | Image: Construction of the construle of the construction of the construction of the const   | I. Pursuant to<br>office or re-   | o the provisions at Sec<br>gistered agent or but<br>n familiar with a dac | stions 607 0502 and 607<br>h, in the State of Florida<br>zear ne officialitions of | 7.1508, Florida Statute<br>Such change was a<br>Section 607.0505, Flo                           | <b>84</b> City   | poration submits this statement for the<br>ation's board of directors. I hereby acc |   | ip Code<br>4145<br>g its registered<br>as registered                  |
| MAE SCHMOLLING, WOLFGANG 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP  | NE       SCHMOLLING, WOLFGANG       12 NAME         SEET ADDRESS       13 STREET ADDRESS         Y. SL-2IP       14 CITY-ST-2IP         MARCO ISLAND FL       3 4 1 4 5         LE       DELETE         2 NAME       2 3 STREET ADDRESS         Y-SL-2IP       2 4 CITY-ST-2IP         VE       2 3 STREET ADDRESS         Y-SL-2IP       2 4 CITY-ST-2IP         VE       2 4 CITY-ST-2IP         VE       3 3 STREET ADDRESS         Y-SL-2IP       2 4 CITY-ST-2IP         VE       3 3 STREET ADDRESS         Y-SL-2IP       2 4 CITY-ST-2IP         VE       3 3 STREET ADDRESS         Y-SL-2IP       3 4 CITY-ST-2IP         VE       DELETE         3 3 STREET ADDRESS       -77         YS-2IP       3 4 CITY-ST-2IP         VE       DELETE         4 10 TLE       Change         Addition       4 2 NAME         YS-2IP       4 3 STREET ADDRESS         Y-ST-2IP       5 3 STREET ADDRESS   | anwione _   |   |  | V   | 84 City<br>es, the above named cor<br>uthorized by the corpore<br>rida Statutes.<br>GANG SCHMOL  |   |   | ip Code<br>4145<br>g its registered<br>as registered<br>1997          |
| S61 KENDALL DR<br>MARCO ISLAND FL       3 4 1 4 5       13 STREET ADDRESS<br>14 GTY-ST-2IP         ILE       DELETE       21 TITLE         NME       22 NAME       23 STREET ADDRESS         NME       23 STREET ADDRESS       23 STREET ADDRESS         V-SI-2P       24 GTY-ST-2IP   | S61 KENDALL DR<br>MARCO ISLAND FL       3 4 1 4 5         1 3 STREET ADDRESS<br>1 4 007: ST-2P       1 4 007: ST-2P         Le       DELETE       2 11TLE         Le       2 2 NAVE         V: S1-2P       2 4 C17: ST-2P         V: S1-2P       3 3 STREET ADDRESS         V: S1-2P       3 3 STREET ADDRESS         V: S1-2P       3 3 STREET ADDRESS         V: S1-2P       3 4 C17: ST-2P         V: S1-2P       4 2 NAME         V: S1-2P       5 2 NAME   | s   | Signatore, type i a portera nan   | ie of registered agent and titic if  | nppficable (NOTE  | 84 City<br>es, the above named cor<br>uthorized by the corpore<br>rida Statutes.<br>SANG SCHMOL<br>Registered Apent signature requ   | uired when reinstating)   | purpose of changin ept the appointment $\mathcal{M}_{\text{DATE}}$  |   |
| MARCO ISLAND FL         3 4 7 4 3         14 (ITY-ST-ZIP           LE         DELETE         21 TITLE         Change         Addition           ARE         23 STREET ADDRESS         23 STREET ADDRESS         71         Change         Addition           ARE         DELETE         21 TITLE         24 GTY-ST-ZIP         71         Change         Addition           KE         DELETE         31 TITLE         71         Change         Addition           MA         32 STREET ADDRESS         71         Change         Addition           MA         32 NAME         33 STREET ADDRESS         71         Change         Addition           MA         33 STREET ADDRESS         33 STREET ADDRESS         71         Change         Addition           MA         33 STREET ADDRESS         33 STREET ADDRESS         71         Change         Addition           MA         33 STREET ADDRESS         33 STREET ADDRESS         71         Change         Addition           MAE         DELETE         41 TITLE         10 Change         Addition           MAE         10 DELETE         51 TITLE         10 Change         Addition           MAE         10 DELETE         53 STREET ADDRESS         72 NAME   | WARCO ISLAND FL       3 4/14/5       14 CITY-ST-2IP         LE       DELETE       21 TITLE       Change       Addition         VE       DELETE       21 STREET ADDRESS       22 GITY-ST-ZIP   | LE  | Stanatore, type() for the name  | ne of regulation agent and title if<br>DFFICERS AND DIRECT                         | npricable (NOTE<br>ORS  | 84 City<br>es, the above named cor<br>uthorized by the corpore<br>rida Statutes,<br>SANG SCHMOL<br>Registered Apent signature req.<br>13.  | uired when reinstating)   | purpose of changin<br>ept the appointment<br>DATE   | ORS IN 12   |
| ILE DELETE 2.1 TITLE Change Addition<br>MAE 22 NAME<br>23 STREET ADDRESS<br>24 GTY-ST-2IP<br>ILE 32 NAME<br>33 STREET ADDRESS<br>1Y-ST-2IP<br>ILE 33 NAME<br>33 STREET ADDRESS<br>1Y-ST-2IP<br>ILE Change Addition<br>Addition<br>ME Addition<br>ME Addition<br>ME Addition<br>ME Addition<br>ME ADDRESS<br>1Y-ST-2IP<br>ILE Change Addition<br>Addition<br>Addition<br>Addition<br>Addition<br>Addition<br>Addition<br>IT-ST-2IP<br>ILE Change Addition<br>IT-ST-2IP<br>ILE CHANGE ADDRESS<br>IT-ST-2IP<br>ILE CHANGE ADDRES | LEE DELETE 21 TITLE Change Addition ME 22 NAME 22 NAME 23 STREET ADDRESS 42 CITY-ST-ZIP 4E Change Addition 42 NAME 33 STREET ADDRESS 44 CITY-ST-ZIP 4E Change Addition ME 42 NAME 42 N  | 11 11 11 11 11 11 11 11 11 11 11 11 11  | PT<br>SCHMOLLING, WO  | DEFICERS AND DIRECT  | npricable (NOTE<br>ORS  | 84     City       ss, the above-named corr<br>uthorized by the corpore<br>rida Statutes.       SANG     SCHMOL       Registered Agent signature required<br>13.       1.1 TITLE       1.2 NAME   | uired when reinstating)   | purpose of changin<br>ept the appointment<br>DATE   | ORS IN 12   |
| REET ADDRESS       23 STREET ADDRESS         IV-S1-2/F       24 CITY-ST-2/P         IAE       32 NAME         AME       32 STREET ADDRESS         IV-S1-2/F       33 STREET ADDRESS         IV-S1-2/F       34 CITY-ST-2/P         IV-S1-2/F       34 CITY-ST-2/P         IV-S1-2/P       34 CITY-ST-2/P         IV-S1-2/P       34 CITY-ST-2/P         IV-S1-2/P       34 CITY-ST-2/P         IV-S1-2/P       44 CITY-ST-2/P         IV-S1-2/P       44 CITY-ST-2/P         IV-S1-2/P       44 CITY-ST-2/P         IV-S1-2/P       51 TITLE         IV-S1-2/P       Change         IV-S1-2/P       44 CITY-ST-2/P         IV-S1-2/P       51 TITLE         IV-S1-2/P       51 TITLE         IV-S1-2/P       53 STREET ADDRESS         IV-S1-2/P       53 STREET ADDRESS         IV-S1-2/P       53 STREET ADDRESS         IV-S1-2/P       54 CITY-S1-2/P         IV-S1-2/P       54 CITY-S1-2/P </td <td>CEET ADDRESS       23 STREET ADDRESS         Y-SI-2/F       24 QIY-SI-2/P         LEE       DELETE         33 STREET ADDRESS         Y-SI-2/F       34 QIY-SI-2/P         ME       33 STREET ADDRESS         Y-SI-2/F       34 QIY-SI-2/P         LE       DELETE         44 QIY-SI-2/P      </td> <td>LE<br/>REET ADORESS</td> <td>PT<br/>SCHMOLLING, WO<br/>561 KENDALL DR</td> <td>NO OF HEAD COME AND DIRECT</td> <td>npricable (NOTE<br/>ORS</td> <td>84     City       35, the above-named corruthorized by the corporation statutes.     SANG SCHMOL       GANG SCHMOL     13.       1.1 TILE     1.2 NAME       1.3 STREET ADDRESS</td> <td>uired when reinstating)</td> <td>purpose of changin<br/>ept the appointment<br/>DATE</td> <td>ORS IN 12</td>  | CEET ADDRESS       23 STREET ADDRESS         Y-SI-2/F       24 QIY-SI-2/P         LEE       DELETE         33 STREET ADDRESS         Y-SI-2/F       34 QIY-SI-2/P         ME       33 STREET ADDRESS         Y-SI-2/F       34 QIY-SI-2/P         LE       DELETE         44 QIY-SI-2/P   | LE<br>REET ADORESS  | PT<br>SCHMOLLING, WO<br>561 KENDALL DR                                    | NO OF HEAD COME AND DIRECT   | npricable (NOTE<br>ORS  | 84     City       35, the above-named corruthorized by the corporation statutes.     SANG SCHMOL       GANG SCHMOL     13.       1.1 TILE     1.2 NAME       1.3 STREET ADDRESS  | uired when reinstating)   | purpose of changin<br>ept the appointment<br>DATE   | ORS IN 12   |
| Y-SI-2/F       2 4 CITY-SI-2/P         CE       DELETE       31 TITLE         Addition       32 NAME         HEE* ADDRESS       33 STREET ADDRESS         Y-SI-2/P       34 CITY-SI-2/P         LE       DELETE         Addition       4.2 NAME         ARET ADDRESS       4.3 STREET ADDRESS         Y-SI-2/P       34 CITY-SI-2/P         LE       DELETE       4.1 TITLE         ME       4.2 NAME         ARET ADDRESS       4.3 STREET ADDRESS         Y-SI-2/P       4.4 CITY-SI-2/P         LE       DELETE       5.1 TITLE         VE       S2 NAME       S3 STREET ADDRESS         Y-SI-2/P       4.4 CITY-SI-2/P   | Y-SI-2IF       2.4 GIY-SI-2IP         LEE       DELETE       3.1 TITLE         ME       3.2 NAME         ME       3.3 STREET ADDRESS         Y-SI-2IP       3.4 GIY-SI-2IP         LE       DELETE         4.1 CIY-SI-2IP         LE       3.3 STREET ADDRESS         Y-SI-2IP       3.4 GIY-SI-2IP         LE       DELETE         4.1 TITLE       Change         Addition         ME       4.2 NAME         4.2 NAME         4.3 STREET ADDRESS         Y-SI-2IP         4.4 CIY-SI-2IP         4.5 STREET ADDRESS         Y-SI-2IP         4.6 CIY-SI-2IP         VE       DELETE         5.1 TITLE         Y-SI-2IP         4.2 NAME         4.2 NAME         4.2 NAME         4.2 NAME         4.2 NAME         S.2 NAME         S.2 NAME         S.2 NAME         S.2 NAME         S.3 STREET ADDRESS         Y S.1 - 2IP         S.2 NAME         S.3 STREET ADDRESS         Y S.1 - 2IP         LEE       DELETE         DELE   | E<br>LE<br>ME<br>REET ADORESS<br>Y - ST - ZIP   | PT<br>SCHMOLLING, WO<br>561 KENDALL DR                                    | NO OF HEAD COME AND DIRECT   |   | 84         City           35, the above-named corrupt         uthorized by the corpore           vida Statutes.         SCHMOL           GANG SCHMOL         Itherature required           13.         1.1 TILE           1.2 NAME         1.3 STREET ADDRESS           1.4 CITY-ST-ZIP         2.1 TILE   | uired when reinstating)   | purpose of changin<br>ept the appointment<br>Date<br>ICERS AND DIRECT   | ORS IN 12<br>je Addition  |
| LEE       DELETE       3.1 TITLE       -***       Change       Addition         ME       3.2 NAME       3.3 STREET ADDRESS       3.3 STREET ADDRESS         Y-SY: ZIP       3.4. CITY-ST-ZIP   | LEE       DELETE       3.1 TILE   | ILE KEELADORESS<br>Y-ST-ZIP<br>LE KEELADORESS<br>Y-ST-ZIP   | PT<br>SCHMOLLING, WO<br>561 KENDALL DR                                    | NO OF HEAD COME AND DIRECT   |   | 84     City       35, the above-named corulthorized by the corpore<br>vida Statutes.     Schedowner       SANG     SCHMOL       Basistered Agent signature required     13.       1.1 TITLE     1.2 NAME       1.3 STREET ADDRESS     1.4 CITY-ST-ZIP       2.1 TITLE     2.2 NAME   | uired when reinstating)   | purpose of changin<br>ept the appointment<br>Date<br>ICERS AND DIRECT   | ORS IN 12<br>je Addition  |
| HEET ADDRESS   Y-ST-ZIP   LEF   DELETE   4.1 TITLE   Change   Addition   ME   AUTY-ST-ZIP   4.2 NAME   4.2 NAME   4.3 STREET ADDRESS   Y-ST-ZIP   4.4 CITY-ST-ZIP   LEE   DELETE   5.1 TITLE   Change   Addition   VE   S2 NAME   REET ADDRESS   Y-ST-ZIP   LE   DELETE   5.1 TITLE   Change   Addition   S2 NAME   Y-ST-ZIP   LE   DELETE   5.1 TITLE   Change   Addition   S2 NAME   Y-ST-ZIP   LE   DELETE   6 1 TITLE   Change   Addition   ME   | HET ADDRESS       3.3 STREET ADDRESS         Y-ST-ZIP       3.4 CITY-ST-ZIP         LE       DELETE         ME       4.2 NAME         4.2 NAME         4.2 NAME         4.3 STREET ADDRESS         Y-ST-ZIP         LE         DELETE         J-ST-ZIP         LE         DELETE         DELETE         ST-ZIP         LE         DELETE         ST-ZIP         LE         DELETE         ST-ZIP         LE         DELETE         ST-ST-ZIP         LE         DELETE         ST-ZIP         LE         ST-ZIP         LE         DELETE         STITLE         STITLE         STITLE         STACHT-ST-ZIP         LE         DELETE         STITLE  | ELE   | PT<br>SCHMOLLING, WO<br>561 KENDALL DR                                    | NO OF HEAD COME AND DIRECT   |   | 84       City         35, the above-named corulthorized by the corpore vida Statutes.       Sang SchmOL         35ANG SCHMOL       Iterational signature required agent signature sig | uired when reinstating)   | purpose of changin<br>ept the appointment<br>Date<br>ICERS AND DIRECT   | ORS IN 12<br>je Addition  |
| Y-ST-ZIP     3.4. CITY-ST-ZIP       LE     DELETE       4.1 TITLE       ME       ARET ADDRESS       Y-ST-ZIP       4.3 STREET ADDRESS       Y-ST-ZIP       4.4 CITY-ST-ZIP       LE       DELETE       5.1 TITLE       ST-ZIP       VE       ST-ZIP       VE       ST-ZIP       LE       DELETE       5.1 TITLE       ST-ZIP       LE       DELETE       5.3 STREET ADDRESS       Y-ST-ZIP       LE       DELETE       5.3 STREET ADDRESS       Y-ST-ZIP       LE       DELETE       5.3 STREET ADDRESS       Y-ST-ZIP       LE       DELETE       S.3 STREET ADDRESS       Y-ST-ZIP       LE       DELETE       S.4 CITY-ST-ZIP       LE       DELETE       S.4 CITY-ST-ZIP       LE       Change       Addition       ME       DELETE       6.1 TITLE       Change       Addition       ME   | Y-ST-ZIP       34. CITY-ST-ZIP         LE       DELETE       4.1 TITLE       Change       Addition         ME       4.2 NAME       4.2 NAME       4.2 NAME       4.2 NAME         AEET ADDRESS       4.3 STREET ADDRESS       4.4 CITY-ST-ZIP       1.0 ELETE       1.0 ELETE         VE       DELETE       5.1 TITLE       Change       Addition         VE       DELETE       5.1 TITLE       Change       Addition         VE       S3 STREET ADDRESS       5.3 STREET ADDRESS       Addition         VE       S4 CITY-ST-ZIP       1.0 ELETE       5.1 TITLE       1.0 ELETE         VE       S3 STREET ADDRESS       S3 STREET ADDRESS       4.4 CITY-ST-ZIP       1.0 ELETE   | Image: mail and  | PT<br>SCHMOLLING, WO<br>561 KENDALL DR                                    | NO OF HEAD COME AND DIRECT   |   | B4     City       35, the above-named corulthorized by the corpore<br>vrida Statutes.     SCHMOL       SANG     SCHMOL       1.1 tillte     1.2 NAME       1.3 STREET ADDRESS     1.4 CITY-ST-ZIP       2.1 tillte     2.2 NAME       2.3 STREET ADDRESS     2.4 CITY-ST-ZIP   | uired when reinstating)   | purpose of changin<br>ept the appointment<br>Date<br>ICERS AND DIRECT   | ORS IN 12<br>pe Addition  |
| LE     DELETE     4.1 TITLE     Change     Addition       ME     4.2 NAME       AEFT ADDRESS     4.3 STREET ADDRESS       Y - ST - ZIP     4.4 CITY - ST - ZIP       LE     DELETE     5.1 TITLE       VE     5.2 NAME       REET ADDRESS     5.3 STREET ADDRESS       Y - ST - ZIP     5.3 STREET ADDRESS       VE     5.3 STREET ADDRESS       Y - ST - ZIP     5.4 CITY - ST - ZIP       LE     DELETE     6.1 TITLE       LE     DELETE     6.1 TITLE       ME     DELETE     6.1 TITLE  | LE       DELETE       4.1 TITLE       Change       Addition         ME       4.2 NAME       4.3 STREET ADDRESS       4.4 CITY-ST-ZIP         VE       DELETE       5.1 TITLE       Change       Addition         VE       DELETE       5.1 TITLE       Change       Addition         VE       DELETE       5.1 TITLE       Change       Addition         VE       S2 NAME       S3 STREET ADDRESS       S3 STREET ADDRESS       Addition         VE       S2 NAME       S4 CITY-ST-ZIP       Change       Addition         VE       S3 STREET ADDRESS       S4 CITY-ST-ZIP       Change       Addition         VE       DELETE       6 1 TITLE       Change       Addition         VE       DELETE       6 1 TITLE       Change       Addition         VEF ADDRESS       S3 STREET ADDRESS       6 3 STREET ADDRESS       4 Addition         V-SI-7/2       S4 CITY-ST-ZIP       S4 CITY-ST-ZIP       Change       Addition         V-SI-7/2       S4 CITY-ST-ZIP       S4 CITY-ST-ZIP       S4 CITY-ST-ZIP       S4 CITY-ST-ZIP       S4 CITY-ST-ZIP       S4 CITY-ST-ZIP         L       S4 CITY-ST-ZIP       S4 CITY-ST-ZIP       S4 CITY-ST-ZIP       S4 CITY-ST-ZIP       S4 CITY-ST-ZIP <td< td=""><td>ILE         ILE           ILE         ILE           ILE</td><td>PT<br/>SCHMOLLING, WO<br/>561 KENDALL DR</td><td>NO OF HEAD COME AND DIRECT</td><td></td><td>B4     City       B4     City       SANG     SCHMOL       Bajistered Agent signature req.     13.       1.1     TILE       1.2     NAME       1.3     STREET ADDRESS       1.4     CITY-ST-ZIP       2.1     TITLE       2.2     NAME       2.3     STREET ADDRESS       2.4     CITY-ST-ZIP       3.1     TITLE       3.2     NAME</td><td>uired when reinstating)</td><td>purpose of changin<br/>ept the appointment<br/>Date<br/>ICERS AND DIRECT</td><td>ORS IN 12<br/>pe Addition</td></td<> | ILE         ILE           ILE   | PT<br>SCHMOLLING, WO<br>561 KENDALL DR                                    | NO OF HEAD COME AND DIRECT   |   | B4     City       SANG     SCHMOL       Bajistered Agent signature req.     13.       1.1     TILE       1.2     NAME       1.3     STREET ADDRESS       1.4     CITY-ST-ZIP       2.1     TITLE       2.2     NAME       2.3     STREET ADDRESS       2.4     CITY-ST-ZIP       3.1     TITLE       3.2     NAME  | uired when reinstating)   | purpose of changin<br>ept the appointment<br>Date<br>ICERS AND DIRECT   | ORS IN 12<br>pe Addition  |
| AEET ADDRESS     4.3 STREET ADDRESS       Y - ST - ZIP     4.4 C(TY - ST - ZIP       LE     DELETE       S 2 NAME       KEE ADDRESS       Y - ST - ZIP       DELETE       S 2 NAME       S 3 STREET ADDRESS       Y - ST - ZIP       DELETE       S 3 STREET ADDRESS       Y - ST - ZIP       DELETE       S 4 CITY - ST - ZIP       LE       DELETE       S 4 CITY - ST - ZIP       LE       DELETE       6 1 TITLE       KE       Addition   | AEFT ADDRESS       4.3 STREET ADDRESS         Y - ST - ZIP       4.4 C(TY - ST - ZIP         LE       DELETE       5.1 TITLE         VE       5.2 NAME         REET ADDRESS       5.3 STREET ADDRESS         Y - ST - ZIP       5.3 STREET ADDRESS         Y - ST - ZIP       5.4 C(TY - ST - ZIP         LE       DELETE       5.3 STREET ADDRESS         Y - ST - ZIP       5.4 C(TY - ST - ZIP         LE       DELETE       6.1 TITLE         ME       6.2 NAME         REET ADDRESS       6.3 STREET ADDRESS         Y - ST - ZIP       6.3 STREET ADDRESS         Y - ST -  | ILLE IN A TOTHE IS<br>REET ADORESS<br>V-ST-ZIP<br>LE<br>WE<br>REET ADORESS<br>V-ST-ZIF<br>LE<br>ME<br>HET ADORESS   | PT<br>SCHMOLLING, WO<br>561 KENDALL DR                                    | NO OF HEAD COME AND DIRECT   |   | B4     City       B5, the above named corruptorized by the corpore vida Statutes.     SANG SCHMOL       Thegistered Agent signature required     13.       1.1 TITLE     1.2 NAME       1.3 STREET ADDRESS     1.4 CITY - ST - ZIP       2.1 TITLE     2.2 NAME       2.3 STREET ADDRESS     2.4 CITY - ST - ZIP       3.1 TITLE     3.2 NAME       3.2 NAME     3.3 STREET ADDRESS  | uired when reinstating)   | purpose of changin<br>ept the appointment<br>Date<br>ICERS AND DIRECT   | ORS IN 12<br>pe Addition  |
| Y - ST-ZIP     4.4 CITY - ST-ZIP       LE     DELETE       S 2 NAME       KE       S 3 STREET ADDRESS       IY - ST-ZIP       LE       DELETE       S 4 CITY - ST-ZIP       LE       DELETE       S 4 CITY - ST-ZIP       Change       Addition       ME       DELETE       6 1 TITLE       KE   | Y - ST - ZIP     4.4 CITY - ST - ZIP       LE     DELETE     5.1 TITLE       VE     5.2 NAME       SEEL ADDRESS     5.3 STREET ADDRESS       Y - ST - ZIP     5.4 CITY - ST - ZIP       LE     DELETE       6.1 TITLE     Change       Addition       ME     6.3 STREET ADDRESS       Y - ST - ZIP     6.4 CITY - ST - ZIP       LE     DELETE       6.1 TITLE     Change       Addition       WE     6.3 STREET ADDRESS       Y - ST - ZIP     6.4 CITY - ST - ZIP   | Image: Second  | PT<br>SCHMOLLING, WO<br>561 KENDALL DR                                    | NO OF HEAD COME AND DIRECT   |   | B4     City       SANG     SCHMOL       Basis     Statutes.       SANG     SCHMOL       Basis     Basis       1.1     TILE       1.2     NAME       1.3     STREET ADDRESS       1.4     CITY-ST-ZIP       2.1     TILE       2.2     NAME       2.3     STREET ADDRESS       2.4     CITY-ST-ZIP       3.1     TILE       3.2     NAME       3.3     STREET ADDRESS       3.4     CITY-ST-ZIP   | uired when reinstating)   | purpose of changin<br>ept the appointment<br>Date<br>ICERS AND DIRECT<br>Changer  | ORS IN 12<br>ge Addition  |
| LE DELETE 5.1 TITLE Change Addition<br>WE 52 NAME<br>REEL ADDRESS<br>(Y: S1- ZIP<br>LE DELETE 61 TITLE Change Addition<br>ME 62 NAME   | LE     DELETE     5.1 TITLE     Change     Addition       VE     5.2 NAME     5.2 NAME     S.3 STREET ADDRESS       Y-S1-2IP     5.4 CITY-ST-ZIP     LE     DELETE     6.1 TITLE       LE     DELETE     6.1 TITLE     Change     Addition       ME     6.2 NAME     6.3 STREET ADDRESS     Change     Addition       VE     6.4 CITY-ST-ZIP     6.3 STREET ADDRESS     Change     Addition       VE     6.3 STREET ADDRESS     6.3 STREET ADDRESS     Change     Addition       V-SI-7/2     6.4 CITY-ST-ZIP     Change     Addition   | Stratt         Stratt           LE         ME           ME         (Y-ST-ZIP)           LE         ME           REET ADDRESS         (Y-ST-ZIP)           LE         ME           ME         (Y-ST-ZIP)           LE         ME           ME         REET ADDRESS           (Y-ST-ZIP)         LE           ME         (Y-ST-ZIP)           LE         ME           LE         (Y-ST-ZIP)           LE         LE   | PT<br>SCHMOLLING, WO<br>561 KENDALL DR                                    | NO OF HEAD COME AND DIRECT   |   | B4     City       B5, the above named consultation is a statutes.     City       SANG     SCHMOL       Thegistered Agent signature required     13.       1.1 TITLE     1.2 NAME       1.3 STREET ADDRESS     1.4 CITY - ST - ZIP       2.1 TITLE     2.2 NAME       2.3 STREET ADDRESS     2.4 CITY - ST - ZIP       3.1 TITLE     3.2 NAME       3.3 STREET ADDRESS     3.4 CITY - ST - ZIP       3.1 TITLE     3.2 NAME       3.3 STREET ADDRESS     3.4 CITY - ST - ZIP       3.1 TITLE     3.4 CITY - ST - ZIP       3.1 TITLE     3.4 CITY - ST - ZIP  | uired when reinstating)   | purpose of changin<br>ept the appointment<br>Date<br>ICERS AND DIRECT<br>Changer  | ORS IN 12<br>ge Addition<br>ge Addition                               |
| VE         5 2 NAME           REEL ADDRESS         5 3 STREET ADDRESS           (Y - S1 - 2IP         5.4 CITY - ST - 2IP           LE         DELETE           ME         6 1 TITLE           ME         62 NAME  | VE     5 2 NAME       REELADDRESS     5 3 STREET ADDRESS       Y - S1 - ZIP     54 CITY - ST - ZIP       LE     DELETE       6 1 TITLE     Change       Addition       ME     62 NAME       62 NAME       63 STREET ADDRESS       Y - S1 - ZIP       63 STREET ADDRESS       Y - S1 - ZIP       64 CITY - ST - ZIP       64 CITY - ST - ZIP   | Image: Second  | PT<br>SCHMOLLING, WO<br>561 KENDALL DR                                    | NO OF HEAD COME AND DIRECT   |   | 84     City       B3, the above-named corruthorized by the corpore price of a statutes.     SANG SCHMOL       B4, City     Statutes.       SANG SCHMOL     Intervention of a statutes.       B3, 1.1 TITLE     1.2 NAME       1.3 STREET ADDRESS     1.4 CITY-ST-ZIP       2.1 TITLE     2.2 NAME       2.3 STREET ADDRESS     2.4 CITY-ST-ZIP       3.1 TITLE     3.2 NAME       3.3 STREET ADDRESS     3.4 CITY-ST-ZIP       3.1 TITLE     3.2 NAME       3.3 STREET ADDRESS     3.4 CITY-ST-ZIP       4.1 TITLE     4.1 TITLE       4.2 NAME  | uired when reinstating)   | purpose of changin<br>ept the appointment<br>Date<br>ICERS AND DIRECT<br>Changer  | ORS IN 12<br>ge Addition  |
| REE1 ADDRESS         5 3 STREET ADDRESS           Y - S1 - ZIP         5.4 CITY - ST - ZIP           LE         DELETE         6 1 TITLE           ME         62 NAME  | REET ADDRESS     5.3 STREET ADDRESS       Y - S1 - ZIP     5.4 CITY - ST - ZIP       LE     DELETE       6.1 TITLE       ME       6.2 NAME       6.3 STREET ADDRESS       Y - ST - ZIP       6.3 STREET ADDRESS       Y - ST - ZIP       6.3 STREET ADDRESS       Y - ST - ZIP       6.4 CITY - ST - ZIP  | Image: Control of the contro | PT<br>SCHMOLLING, WO<br>561 KENDALL DR                                    | NO OF HEAD COME AND DIRECT   | INFL <sup>5</sup> Cable (NOTE<br>ORS  | 84       City         B3, the above-named corruthorized by the corpore price of a statutes.       SANG SCHMOL         Bagistered Agent signature required a statutes.       SANG SCHMOL         Bagistered Agent signature required a statutes.       13.         1.1 TITLE       1.2 NAME         1.3 STREET ADDRESS       1.4 CITY-ST-ZIP         2.1 TITLE       2.2 NAME         2.3 STREET ADDRESS       2.4 CITY-ST-ZIP         3.1 TITLE       3.2 NAME         3.3 STREET ADDRESS       3.4 CITY-ST-ZIP         3.1 TITLE       3.2 NAME         3.3 STREET ADDRESS       3.4 CITY-ST-ZIP         4.1 TITLE       4.2 NAME         4.3 STREET ADDRESS       3.4 CITY-ST-ZIP         4.1 TITLE       4.2 NAME         4.3 STREET ADDRESS       4.4 CITY-ST-ZIP  | uired when reinstating)   | purpose of changin<br>ept the appointment<br>Jack Law<br>ICERS AND DIRECT<br>Chang<br>Chang<br>Chang<br>Chang   | ORS IN 12<br>ge Addition<br>ge Addition                               |
| S1-2/P         54 CITY-ST-2/P           LE         DELETE         61 TITLE           ME         62 NAME  | Y: S1: 2IP     5.4 CITY-ST-ZIP       LE     DELETE       6.1 TITLE     Change       ME     6.2 NAME       6.2 NAME       6.3 STREET ADDRESS       Y: S1: 712       6.4 CITY-ST-ZIP  | Image: Second  | PT<br>SCHMOLLING, WO<br>561 KENDALL DR                                    | NO OF HEAD COME AND DIRECT   | INFL <sup>5</sup> Cable (NOTE<br>ORS  | 84     City       B3, the above-named corruthorized by the corpore pricia Statutes.     SANG SCHMOL       Bagistered Agent signature required     13.       1.1 TITLE     1.2 NAME       1.3 STREET ADDRESS     1.4 CITY-ST-ZIP       2.1 TITLE     2.2 NAME       2.3 STREET ADDRESS     2.4 CITY-ST-ZIP       3.1 TITLE     3.2 NAME       3.3 STREET ADDRESS       3.4 CITY-ST-ZIP       3.1 TITLE       3.2 NAME       3.3 STREET ADDRESS       3.4. CITY-ST-ZIP       4.1 TITLE       4.2 NAME       4.3 STREET ADDRESS       3.4. CITY-ST-ZIP       5.1 TITLE       4.2 NAME       4.3 STREET ADDRESS       3.4. CITY-ST-ZIP       5.1 TITLE   | uired when reinstating)   | purpose of changin<br>ept the appointment<br>Jack Law<br>ICERS AND DIRECT<br>Chang<br>Chang<br>Chang<br>Chang   | ORS IN 12<br>Je Addition<br>Je Addition<br>ge Addition                |
| LE DELETE 6 1 TITLE Change Addition  | LE DELETE 6 1 TITLE Change Addition<br>ME 62 NAME<br>63 STREET ADDRESS<br>Y-ST-712 64 CITY-ST-ZIP<br>1 do berefy certify that the oformation supplied with this filling does not outplify for the exemption stated in Section 119 (27(3)(i)). Elogida Statutes Lifuther certify that the  | Image: Second  | PT<br>SCHMOLLING, WO<br>561 KENDALL DR                                    | NO OF HEAD COME AND DIRECT   | INFL <sup>5</sup> Cable (NOTE<br>ORS  | B4       City         35, the above-named corrupt of a Statutes.       Sand Statutes.         SANG       SCHMOL         Registered Agent signature required a Statutes.       Schuld Statutes.         11       11         12       NAME         1.3       STREET ADDRESS         1.4       City-ST-ZIP         2.1       TITLE         2.2       NAME         2.3       STREET ADDRESS         2.4       City-ST-ZIP         3.1       TITLE         3.2       NAME         3.3       STREET ADDRESS         3.4       CITY-ST-ZIP         4.1       TITLE         4.2       NAME         3.3       STREET ADDRESS         3.4       CITY-ST-ZIP         4.1       TITLE         4.2       NAME         4.3       STREET ADDRESS         4.4       CITY-ST-ZIP         5.1       TITLE         5.2       NAME   | uired when reinstating)   | purpose of changin<br>ept the appointment<br>Jack Law<br>ICERS AND DIRECT<br>Chang<br>Chang<br>Chang<br>Chang   | ORS IN 12<br>Je Addition<br>Je Addition<br>ge Addition                |
|  | REFLADDRESS     6.3 STREET ADDRESS       Y - ST - 712     6.4 CITY - ST - ZIP   | ILE         ISINA TOTHE         IS           LE         ME         ISINA TOTHE SS         ISINA TOTHE SS           Y - ST - ZIP         IE         ISINA TOTHE SS         ISINA TOTHE SS           Y - ST - ZIP         IE         ISINA TOTHE SS         ISINA TOTHE SS           Y - ST - ZIP         IE         ISINA TOTHE SS         ISINA TOTHE SS           Y - ST - ZIP         IE         IE         IE           ME         REFT ADDRESS         Y - ST - ZIP         IE           VE         REET ADDRESS         YE         IE  | PT<br>SCHMOLLING, WO<br>561 KENDALL DR                                    | NO OF HEAD COME AND DIRECT   | INFL <sup>5</sup> Cable (NOTE<br>ORS  | B4       City         25, the above-named corulthorized by the corpore vida Statutes.       SANG SCHMOL         28, the above-named corulthorized by the corpore vida Statutes.       SANG SCHMOL         28, the corpore vida Statutes.       SCHMOL         29, the corpore vida Statutes.       SCHMOL         11, the corpore vida Statutes.       13, the corpore vida Statutes.         13, the corpore vida Statutes.       14, the corpore vida Statutes.         14, the corpore vida Street Address       2, and the vida Street Address         2, a Street Address       2, a City-St-ZiP         3, a The vida Street Address       3, a City-St-ZiP         3, a Street Address       3, a City-St-ZiP         4, a Street Address       3, a City-St-ZiP         4, a Street Address       4, a City-St-ZiP         5, a Street Address       4, a City-St-ZiP         5, a Street Address       4, a City-St-ZiP         5, a Street Address       5, a Street Address   | uired when reinstating)   | purpose of changin<br>ept the appointment<br>Jack Law<br>ICERS AND DIRECT<br>Chang<br>Chang<br>Chang<br>Chang   | ORS IN 12<br>Je Addition<br>Je Addition<br>ge Addition                |
| REFT ADDRESS 63 STREET ADDRESS   | Y-SI-7/2<br>64 CITY-SI-7/2<br>L do berefy certify that the of accuration supplied with this filling does not publify for the exemption stated in Section 119 (27(3)(i)) Florida Statutes L further certify that the   | ILE         ILE           ME         REET ADDRESS           IY - ST - ZIP         ILE           ME         ME           REET ADDRESS         IY - ST - ZIP           LE         ME           ME         ME           REET ADDRESS         IY - ST - ZIP           LE         ME           ME         REET ADDRESS           IY - ST - ZIP         IE           ME         REFT ADDRESS           IY - ST - ZIP         IE           ME         REFT ADDRESS           IY - ST - ZIP         IE           ME         REFT ADDRESS           IY - ST - ZIP         IE           ME         REFT ADDRESS           IY - ST - ZIP         IE  | PT<br>SCHMOLLING, WO<br>561 KENDALL DR                                    | NO OF HEAD COME AND DIRECT   | AFF <sup>5</sup> Cable (NOTE<br>ORS<br>DELETE<br>DELETE<br>DELETE<br>DELETE<br>DELETE<br>DELETE | B4       City         35, the above-named corulthorized by the corpore vida Statutes.       SANG SCHMOL         36, 11, 11, 11, 11, 11, 11, 11, 11, 11, 1  | uired when reinstating)   | purpose of changin<br>ept the appointment<br>DATE<br>ICERS AND DIRECT<br>Change<br>Change<br>Change<br>Change<br>Change<br>Change<br>Change<br>Change<br>Change<br>Change | ORS IN 12<br>pe Addition<br>ge Addition<br>ge Addition<br>ge Addition |
|  | L do hereby cortify that the information simplied with this filling does not qualify for the exemption stated in Section 119 07(3)(). Florida Statutes, Liturber certify that the   | INATORE         5           ILE         ME           REET ADDRESS         1           IV ST-ZIP         I           LE         ME           REET ADDRESS         1           IV-ST-ZIP         I           LE         ME           REET ADDRESS         1           IV-ST-ZIP         I           LE         ME           REET ADDRESS         1           IV-ST-ZIP         I           LE         ME           REFT ADDRESS         1           IV-ST-ZIP         I           VE         ME           REEL ADDRESS         1           IV-ST-ZIP         I           IE         ME           ME         1           IE         ME           IE         ME           IE         ME           IE         ME   | PT<br>SCHMOLLING, WO<br>561 KENDALL DR                                    | NO OF HEAD COME AND DIRECT   | AFF <sup>5</sup> Cable (NOTE<br>ORS<br>DELETE<br>DELETE<br>DELETE<br>DELETE<br>DELETE<br>DELETE | B4       City         25, the above named coruthorized by the corpore vida Statutes.       SANG SCHMOL         28, the above named coruthorized Agent signature req.       13.         1.1 TITLE       1.2 NAME         1.3 STREET ADDRESS       1.4 CITY - ST - ZIP         2.1 TITLE       2.2 NAME         2.3 STREET ADDRESS       2.4 CITY - ST - ZIP         3.1 TITLE       3.2 NAME         3.3 STREET ADDRESS       3.4 CITY - ST - ZIP         3.1 TITLE       3.2 NAME         3.3 STREET ADDRESS       3.4 CITY - ST - ZIP         4.1 TITLE       4.2 NAME         3.3 STREET ADDRESS       3.4 CITY - ST - ZIP         4.1 TITLE       5.1 TITLE         5.2 NAME       5.3 STREET ADDRESS         4.4 CITY - ST - ZIP       5.1 TITLE         5.2 NAME       5.3 STREET ADDRESS         5.4 CITY - ST - ZIP       5.1 TITLE         5.2 NAME       5.3 STREET ADDRESS         5.4 CITY - ST - ZIP       5.1 TITLE         5.2 NAME       5.3 CITY - ST - ZIP         6.1 TITLE       6.2 NAME   | uired when reinstating)   | purpose of changin<br>ept the appointment<br>DATE<br>ICERS AND DIRECT<br>Chang<br>Chang   | ORS IN 12<br>pe Addition<br>ge Addition<br>ge Addition<br>ge Addition |
| 4. Loo berefy certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i) Florida Statutes, Liurbar 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 lenal affect as if made under oath the   | INATORE         5           ILE         ME           REET ADORESS         1           IV ST-ZIP         ILE           ME         REET ADORESS           IY-ST-ZIP         ILE   | PT<br>SCHMOLLING, WO<br>561 KENDALL DR                                    | NO OF HEAD COME AND DIRECT   | AFF <sup>5</sup> Cable (NOTE<br>ORS<br>DELETE<br>DELETE<br>DELETE<br>DELETE<br>DELETE<br>DELETE | B4       City         25, the above named coruthorized by the corpore vida Statutes.       SANG SCHMOL         7 Registered Agent signature required a statutes.       SANG SCHMOL         18, 1,1 TITLE       1,2 NAME         1.3 STREET ADDRESS       1,4 CITY - ST - ZIP         2.1 TITLE       2 NAME         2.3 STREET ADDRESS       2 4 CITY - ST - ZIP         3.1 TITLE       3.2 NAME         3.3 STREET ADDRESS       3.4 CITY - ST - ZIP         3.1 TITLE       3.2 NAME         3.3 STREET ADDRESS       3.4 CITY - ST - ZIP         4.1 TITLE       4.1 TITLE         3.2 STREET ADDRESS       3.4 CITY - ST - ZIP         4.1 TITLE       5.2 NAME         5.3 STREET ADDRESS       4.4 CITY - ST - ZIP         5.1 TITLE       5.2 NAME         5.3 STREET ADDRESS       5.4 CITY - ST - ZIP         5.1 TITLE       5.3 STREET ADDRESS         5.4 CITY - ST - ZIP       5.1 TITLE         5.3 STREET ADDRESS       5.4 CITY - ST - ZIP         6.1 TITLE       6.2 NAME         6.3 STREET ADDRESS       6.3 STREET ADDRESS   | uired when reinstating)   | purpose of changin<br>ept the appointment<br>DATE<br>ICERS AND DIRECT<br>Chang<br>Chang   | ORS IN 12<br>pe Addition<br>ge Addition<br>ge Addition<br>ge Addition |