FILE NOW: FILING FEE AFTER MAY 1ST IS \$50.00

SIGNATURE:

Mar 06 1998 8:00am **PROFIT** FLORIDA DEPARTMENI OF STATE CORPORATION Sandra B. Mor ANNUAL REPORT Secretary of State Secretary of S 1998 DIVISION OF CORPO TIONS DOCUMENT # V25835 (2) GARDNYR MICHAEL CAPITAL, INC. Principal Place of Business Mailing Address 2281 LEE ROAD 2281 LEE ROAD SUITE 104 SUITE 104 DO NOT WRITE IN THIS SPACE WINTER PARK FL 32789 WINTER PARK FL 32789 3. Date Incorporated or Qualified 03/31/1992 2. Principal Place of Business 2a. Mailing Address 4. FEI Numbe Applied For 59-3127750 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Country Country Zip Zφ 8. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. Yes Yes 25 29 30 Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name HUNT, PHILIP G. JR 4854 THORNLEA RD Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32817 В3 84 85 Zip Code City 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE 1 1 1111 Change Addition TITLE HUNT, PHILIP G. JR 1.2 NAME NAME **4854 THORNLEA RD** 13 STREET ADDRESS STREET ADDRESS ORLANDO FL CITY-ST-ZIP 1.4 CITY-SY-ZIP DELETE Change \_\_\_ Addition TITLE 2.1 TITLE NAME PIETKIEWICZ, JAMES M. 2 2 NAME STREET ADDRESS 158 WARD DR 2.3 STREET ADDRESS WINTER PARK FL 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3 1 TITLE PIETKIEWICZ, JAMES M. NAME 3.2 NAME 158 WARD DR 3 3 STREET ADDRESS STREET ADDRESS WINTER PARK FL 3 4. CITY-ST-ZIP CITY-ST-ZIP DELETE Addition Change 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change Addition 5 1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP DELETE Change Addition 61 TITLE TITLE 62 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 64 CITY - ST - ZIP CITY-ST-ZIP 14. Thereby 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.

FILED