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Mar 05 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V28125 (5)

1. Corporation Name
ADVANCE MANAGEMENT, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
3 WEST GARGEN STREET SUITE 351 PENSACOLA FL 32501 US	P.O. BOX 13487 PENSACOLA FL 32591 US

3. Date Incorporated or Qualified: 04/09/1992

4. FEI Number: 59-3116542 ☐ Applied For ☐ Not Applicable

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

2. Principal Place of Business	2a. Mailing Address
21 1010 West Garden St	26 1010 West Garden St
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27 [illegible]
City & State 23 Pensacola FL	City & State 28 Pensacola, FL
Zip 24 32501 — Country 25 US	Zip 29 32501 — Country 30 USA

9. Name and Address of Current Registered Agent

ABRAM, JEFFREY P
3 W. GARDEN STREET
SUITE 351
PENSACOLA FL 32501

10. Name and Address of New Registered Agent

81 Name: Jeffrey P. Abram
82 Street Address (P.O. Box Number is Not Acceptable): 1010 West Garden St
83
84 City: Pensacola — FL — 85 Zip Code: 32501

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] Jeffrey P. Abram, VP — 1/15/98

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	BRUNO, PAUL	1.2 NAME	
STREET ADDRESS	619 N BAYLEN ST	1.3 STREET ADDRESS	
CITY-ST-ZIP	PENSACOLA FL	1.4 CITY-ST-ZIP	
TITLE	DVST ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	ABRAM, JEFFREY P	2.2 NAME	
STREET ADDRESS	5464 LIMESTONE ROAD	2.3 STREET ADDRESS	
CITY-ST-ZIP	PENSACOLA FL	2.4 CITY-ST-ZIP	
TITLE	☐ DELETE	3.1 TITLE	☐ 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-ZIP		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	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

CR2E034 (10/97)

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 [signature] 1/15/98 (850) 419-0611