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

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

FILED PROFIT Apr 23 1998 8:00am ELORIDA DEPARTMENT DE STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # (6)THE W. J. SUTTON COMPANY, INC. Principal Place of Business Mailing Address 28100 JONES LOOP ROAD P O BOX 1255 N/A **PUNTA GORDA FL 33982 PUNTA GORDA FL 33951** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/12/1992 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For P.O.BA 511255 21 65-0332565 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Ζip Country 8. This corporation owes or has paid the current year Intangible 24 25 ☐ Yes 29 Personal Property Tax due June 30. 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent SUTTON, WILLIAM J Name 28100 JONES LOOP ROAD Street Address (P.O. Box Number is Not Acceptable) **PUNTA GORDA FL 33982** 83 84 City 85 Zip Code 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. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 TO LE Change Addition SUTTON, W J NAME 1.2 NAME 28100 JONES LOOP ROAD STREET ADDRESS 1.3 STREET ADDRESS PUNTA GORDA FL CITY-ST-ZIP 1.4 City - ST - ZIP DELETE TITLE 21 TITLE Addition SUTTON, WILLIAM J NAME 2 2 NAME 28100 JONEW LOOP ROAD STREET ADDRESS 2.3 STREET ADDRESS PUNTA GORDA FL CITY - ST - ZIP 2. 4 City-St-ZiP TITLE DELETE Change 3.1 TITLE Addition SWANSON, DANIEL R NAME 3.2 NAME 418 MONACO DR STREET ADDRESS 3.3 STREET ADDRESS PUNTA GORDA FL CITY-ST-ZIP 3.4. CITY - \$1 - ZIP XX DELETE TITLE 4.1 TITLE Change Addition TS LEATH, TERESA L NAME 4 2 NAME DEES, SHIRLEY A 1110 CORAL RIDGE 2605 SW BREWER AVE STREET AUDRESS 4.3 STREET ADDRESS ARCADIA FL PUNTA GORDA, FL. CITY-ST-ZIP 44 CITY-ST-ZIP TITLE DELETE Change 5 1 TITLE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP

DELETE

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 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 charging or or production with any edices.

Change

Addition