## **FILED** FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **PROFIT** Mar 06 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # (3)THE BROCO GROUP, INC. Principal Place of Business Mailing Address 4500 NE 35TH ST 1051 NE 52 AVE SUITE 2 OCALA FL 34470 OCALA FL 34479-3214 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/14/1992 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 8247 SE 12th Court 8247 SE 12th Court 59-3135004 Not Applicable Suite. Ant. #. etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5,00 May Be OCAIA. FL OCALA Trust Fund Contribution Added to Fees 28 Country Country 8. This corporation owes or has paid the current year Intangible 34480 25 US A 34480 USA Yes Personal Property Tax due June 30. 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent В1 Name SHERWOOD, CECIL JERRY 8247 SE 12TH CT 62 Street Address (P.O. Box Number is Not Acceptable) OCALA FL 34480 R3 RA City 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 registored 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: typed or poulod name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 TITLE Change Addition Sherwood, CECIL NAME SHERWOOD, CECIL JERRY 1.2 NAME STREET ADDRESS **8247 SE 12TH COURT** eath se 12th court 1.3 STREET ADDRESS **OCALA FL** CITY-ST-ZIP 1.4 CITY-ST-ZIP Change DELETE TITLE VSTD 21 TITLE Addition SHERWOOD, DOUGLAS JAMES NAME 22 NAME 1051 NE 52ND AVE STREET ADDRESS 2.3 STREET ADDRESS OCALA FL CITY-ST-ZIP 2 4 CITY-ST-ZIP DE DELETE TITLE PD Change Addition 31 TITLE NAME WILBANKS, WALTER DEAN 32 NAME STREET ADDRESS 9030 E BLUEWATER DR 3.3 STREET ADDRESS CLARKSTON MI CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 41 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE Change Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE TITLE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 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 supplieriental 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 12 dehanged, or on an attachment with an address. CITY+ST-ZIP 6.4 CITY - ST - ZIP

JERRY

SHERW OOD

SIGNATURE: -

2128/98

352-237-5*968*