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

FILED PROFIT May 08 1998 8:00am FLORIDA DEPARTMENT OF \$1A1E **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # 1. Corporation Name (8) MCCAMMON, INCORPORATED Principal Place of Business Mailing Address **2260 S FRONT ST** 2260 S FRONT ST MELBOURNE FL 32901 DO NOT WRITE IN THIS SPACE MELBOURNE FL 32901 3. Date Incorporated or Qualified 11/02/1972 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-1420167 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country 8. This corporation owes or has paid the current year Inlangible Yes 24 25 29 Porsonal Property Tax due June 30. 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent SHUMAN, SHARON W. 3165 FOXWOOD DR. 82 APOPKA FL 32703 83 Zip Code 3 2 9 0 Melbour 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 lamitar with part accept the obligations of Section 607.0505, Florida Statutes. President 4/26/98 SIGNATURE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE 1.1 TITLE Change Addition TITLE MCCAMMON, GEORGE W 1.2 NAME NAME 2260 S FRONT ST #206 STREET ADDRESS 1.3 STREET ADDRESS MELBOURNE FL CITY-ST-ZIP 1.4 CITY - \$1 - ZIP DLLETE Change Addition TITLE 2.1 TITLE MCCAMMON, MARY A NAME 22 NAME 2260 S FRONT ST STREET ADDRESS 2.3 STREET ADDRESS MELBURNE FL CITY-ST-ZIP 2 4 CHTY-ST-7IP DELETE ☐ Change Addition TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3 4. CITY-ST-ZIP DELETE Change Addition TITLE 4 1 THEF 4. 2 NAME STREET ADDRESS 4.9 STREET ADDRESS 4.4 CITY-ST-7IP CITY-ST-ZIP DELETE Change Addition TITLE 51 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-7IP DELFTE Change ___ Addition TITLE 61 TITLE

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 suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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

62 NAME

6.3 STREET ADDRESS

NAME

STREET ADDRESS

CITY-ST-ZIP

Gream W. Mc Camon