FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

MENT # LICEOAE

DOCUMENT #	H65945	(8)			4 100/01 1 B/FS 01/04 10/10 40/11	Diğel bili bibi b		
2		allina Address						
Principal Place of Business COUNTY ROAD 2054 P.O. BOX 2015		COUNTY ROAD 2054 P.O. BOX 2015						
ALACHUA FL 32615		ALACHUA FL 32615			3. Date Incorporated or Qualific		te of Last R	•
					07/09/1985		04/19/19	
Principal Place of Business	2a. 26	Mailing Address			4. FEI Number 59-2552687		1-1	Applied For Not Applicable
Suite, Apt. #, etc.	201	Suite, Apt. #, etc.						Additional
	27				5. Certificate of Status Desired			Required
City & State		City & State			6. Election Campaign Financing	9 [-1	\$5.0	O May Be
<u> </u>	28				Trust Fund Contribution			d to Fees
Zip Coun	· —	Zip	Country	f	8. This corporation has liability Florida Statutes	for intangible : Yes [] No	tax under s	199.032,
25 O Name and Add	29 ress of Current Regis	tered Anent	30		10. Name and Address of Ne		Agent	
g, Hame and Add	ress of content negro	ioros Agoni	81	Name	10,			
TOVKACH, WALTER M.			82	Carrant Andrew	ress (P.O. Box Number is Not Accep	ntahla)		
527 E. UNIVERSITY AVE.			62	Street Addr	ress (F.O. BOX NUMBER IS NOT ACCE)	plablej		
GAINESVILLE FL 32601			83					
			84	City			85 Z	p Code
						FI	<u> </u>	,
 Pursuant to the provisions of Sec 	Clons 607.0502 and 60	7.1508, Florida Statute	is, the above-i	named corpor	ration submits this statement for the	purpose of cl	nanging its i	Lagaret Lam
or registered agent, or both, in the familiar with, and accept the oblining NATURE.	ne State of Florida. Such	n change was authorize 0505, Florida Statutes	ed by the corp	named corpor poration's boar nt signature require	rd of directors. I hereby accept the a	purpose of cl appointment a	nangrig its i	I agent. I am
or registered agent, or both, in the familiar with, and accept the obling GNATURE. Signature, typed or printed name.	ne State of Florida, Such gations of, Section 607.	n change was authorize 0505, Florida Statutes. applicable NO CTORS	TE Registered Ager	poration's boar	rd of directors. I hereby accept the a	appointment a	ID DIRECTO	PRS IN 12
or registered agent, or both, in the familiar with, and accept the oblining MATURE. Signature, typed or printed nance. Signature Typed or printed nance. LE DP	ne State of Florida, Such gations of, Section 607. The of registered agent and till if OFFICERS AND DIRECT	n change was authorize 0505, Florida Statutes. applicable (NO	TE Registered Age: 13. 1.1 TITLE	poration's boar	rd of directors. I hereby accept the a od whomens along)	appointment a	as registered	PRS IN 12
or registered agent, or both, in the familiar with, and accept the obling IGNATURE. Signature: typed or printed nance. By DP RODBY, CATHLE RODBY, CATHLE Signature: Typed or printed nance. RECORDS ACCEPTANCE.	ne State of Florida, Such gations of, Section 607. The of registered agent and tills if OFFICERS AND DIRECT.	n change was authorize 0505, Florida Statutes. applicable NO CTORS	TE Registered Age 13. 1.1 TITLE 1.2 NAME	nt signature require	rd of directors. I hereby accept the a od whomens along)	appointment a	ID DIRECTO	PRS IN 12
or registered agent, or both, in the familiar with, and accept the obling IGNATURE. Signature, typed or printed nance. BE DP RODBY, CATHLE REEL ADDRESS 7202 NW 132N	ne State of Florida. Such gations of, Section 607. The of registered agent and tills if OFFICERS AND DIRECT. EEN H. D TERR.	n change was authorize 0505, Florida Statutes. applicable NO CTORS	TE Registered Ages 13. 1.1 TITLE 1.2 NAME 1.3 STREET	nt signature require	rd of directors. I hereby accept the a od whomens along)	appointment a	ID DIRECTO	PRS IN 12
or registered agent, or both, in the familiar with, and accept the obling IGNATURE. Signature, typed or printed nance. Signature, typed or printed nance. Signature, typed or printed nance. DP RODBY, CATHL 7202 NW 132N TY-ST-ZIP GAINESVILLE F	ne State of Florida. Such gations of, Section 607. The of registered agent and tills if OFFICERS AND DIRECT. EEN H. D TERR.	n change was authorize 0505, Florida Statutes. applicable NO CTORS DELETE	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-5	nt signature require	rd of directors. I hereby accept the a od whomens along)	appointment a	ID DIRECTO	PRS IN 12
or registered agent, or both, in the familiar with, and accept the oblining the familiar with, and accept the oblining the familiar with accept the familiar with accept the familiar with a control of t	ne State of Florida. Such gations of, Section 607. The of registered agent and tills if OFFICERS AND DIRECT. EEN H. D TERR.	n change was authorize 0505, Florida Statutes. applicable NO CTORS	TE Registered Ages 13. 1.1 TITLE 1.2 NAME 1.3 STREET	nt signature require	rd of directors. I hereby accept the a od whomens along)	appointment a	ID DIRECTO	PRS IN 12
or registered agent, or both, in the familiar with, and accept the oblicing NATURE. Signature, typed or printed nance. Signature, typed or printed nance. Property of the p	ne State of Florida. Such gations of, Section 607. The of registered agent and tills if OFFICERS AND DIRECT. EEN H. D TERR.	n change was authorize 0505, Florida Statutes. applicable NO CTORS DELETE	TE Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREEL 1.4 CITY-5 2.1 TITLE 2.2 NAME	nt signature require	rd of directors. I hereby accept the a od whomens along)	appointment a	ID DIRECTO	PRS IN 12
or registered agent, or both, in the familiar with, and accept the obling IGNATURE. Signature, typed or printed nance. BY THE ROBBY, CATHLE TOO TOO TOO TOO TOO TOO TOO TOO TOO TO	ne State of Florida. Such gations of, Section 607. The of registered agent and tills if OFFICERS AND DIRECT. EEN H. D TERR.	n change was authorize 0505, Florida Statutes. applicable NO CTORS DELETE	TE Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREEL 1.4 CITY-5 2.1 TITLE 2.2 NAME	nt signature require I ADDRESS T ADDRESS	rd of directors. I hereby accept the a od whomens along)	appointment a	ID DIRECTO	PRS IN 12
or registered agent, or both, in the familiar with, and accept the oblices of the control of the	ne State of Florida. Such gations of, Section 607. The of registered agent and tills if OFFICERS AND DIRECT. EEN H. D TERR.	n change was authorize 0505, Florida Statutes. applicable NO CTORS DELETE	TE Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-5 2.1 TITLE 2.2 NAME 2.3 STREET	nt signature require I ADDRESS T ADDRESS	rd of directors. I hereby accept the a od whomens along)	appointment a	ID DIRECTO	PRS IN 12
or registered agent, or both, in the familiar with, and accept the oblicion of the familiar with accept t	ne State of Florida. Such gations of, Section 607. The of registered agent and tills if a OFFICERS AND DIRECT. EEN H. D TERR.	n change was authorize 0505, Florida Statutes. Applicable NO DTORS DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-5 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-5	nt signature require I ADDRESS T ADDRESS	rd of directors. I hereby accept the a od whomens along)	appointment a	ID DIRECTO Change	ORS IN 12 Addition Addition
or registered agent, or both, in the familiar with, and accept the oblicion of the familiar with accept t	ne State of Florida. Such gations of, Section 607. The of registered agent and tills if a OFFICERS AND DIRECT. EEN H. D TERR.	n change was authorize 0505, Florida Statutes. Applicable NO DTORS DELETE	113. 1.1 TITLE 1.2 NAME 1.3 STREET 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-5 3.1 TITLE 3.2 NAME	nt signature require I ADDRESS T ADDRESS	rd of directors. I hereby accept the a od whomens along)	appointment a	ID DIRECTO Change	ORS IN 12 Addition Addition
or registered agent, or both, in the familiar with, and accept the oblices. GNATURE: Signature, typed or printed cands. BY-ST-ZIP GAINESVILLE F REET ADDRESS IY-ST-ZIP	ne State of Florida. Such gations of, Section 607. The of registered agent and tills if a OFFICERS AND DIRECT. EEN H. D TERR.	n change was authorize 0505, Florida Statutes. Applicable NO CTORS DELETE DELETE	113. 1.1 TITLE 1.2 NAME 1.3 STREET 2.4 CITY-5 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-5 3.4 CITY-5 3.4 CITY-5 3.4 CITY-5	nt signature require I ADDRESS SI-ZIP I ADDRESS SI-ZIP ET ADDRESS SI-ZIP	rd of directors. I hereby accept the a od whomens along)	appointment a	D DIRECTO Change Change	PRS IN 12 Addition Addition
or registered agent, or both, in the familiar with, and accept the obling IGNATURE. Signature, typed or printed cand in the second in the sec	ne State of Florida. Such gations of, Section 607. The of registered agent and tills if a OFFICERS AND DIRECT. EEN H. D TERR.	n change was authorize 0505, Florida Statutes. Applicable NO DTORS DELETE	TE Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-5 2 1 TITLE 22 NAME 2.3 STREET 2.4 CITY-5 3.1 TITLE 32 NAME 3.3 STREE 3.4 CITY-5 4.1 TITLE	nt signature require I ADDRESS ST-ZIP I ADDRESS SI-ZIP ET ADDRESS SI-ZIP	rd of directors. I hereby accept the a od whomens along)	appointment a	ID DIRECTO Change	ORS IN 12 Addition Addition
or registered agent, or both, in the familiar with, and accept the obling IGNATURE. Signature, typed or printed nance. AME AME AME AME AME AME AME	ne State of Florida. Such gations of, Section 607. The of registered agent and tills if a OFFICERS AND DIRECT. EEN H. D TERR.	n change was authorize 0505, Florida Statutes. Applicable NO CTORS DELETE DELETE	TE Rogistered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET 2.4 CITY-5 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-5 4.1 TITLE 4.2 NAME 4.1 TITLE 4.2 NAME	nt signature require I ADDRESS ST-ZIP I ADDRESS SI-ZIP ET ADDRESS SI-ZIP	rd of directors. I hereby accept the a od whomens along)	appointment a	D DIRECTO Change Change	PRS IN 12 Addition Addition
or registered agent, or both, in the familiar with, and accept the oblicion of the familiar with accept the familiar	ne State of Florida. Such gations of, Section 607. The of registered agent and tills if a OFFICERS AND DIRECT. EEN H. D TERR.	n change was authorize 0505, Florida Statutes. Applicable NO CTORS DELETE DELETE	## Frogistered Age ## 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-5 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-5 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-5 4.1 TITLE 4.2 NAME 4.3 STREET 4.2 NAME 4.3 STREET	nt signature require I ADDRESS ST-ZIP I ADDRESS SI-ZIP IT ADDRESS SI-ZIP IT ADDRESS IT ADDRESS	rd of directors. I hereby accept the a od whomens along)	appointment a	D DIRECTO Change Change	PRS IN 12 Addition Addition
or registered agent, or both, in the familiar with, and accept the oblices. GNATURE. Signature, typed or printed nance. Signature, typed or printed nance. By CATHLE REELADORESS TOO NAME TO	ne State of Florida. Such gations of, Section 607. The of registered agent and tills if a OFFICERS AND DIRECT. EEN H. D TERR.	n change was authorize 0505, Florida Statutes. Applicable NO CTORS DELETE DELETE	TE Rogistered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET 2.4 CITY-5 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-5 4.1 TITLE 4.2 NAME 4.1 TITLE 4.2 NAME	nt signature require I ADDRESS SI-ZIP I ADDRESS SI-ZIP I ADDRESS SI-ZIP I ADDRESS SI-ZIP	rd of directors. I hereby accept the a od whomens along)	appointment a	D DIRECTO Change Change	PRS IN 12 Addition Addition
or registered agent, or both, in the familiar with, and accept the oblice. IGNATURE. Signature, typed or printed nance. Signature, typed or printed nance. ILE DP RODBY, CATHLE PRODBY, CATHLE PRODBY	ne State of Florida. Such gations of, Section 607. The of registered agent and tills if a OFFICERS AND DIRECT. EEN H. D TERR.	n change was authorize 0505, Florida Statutes. applicable (NO CTORS DELETE DELETE DELETE	TE Progistered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET 2.4 CITY-5 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-5 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-5 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-5 4.4 CITY-5 4.4 CITY-5 4.4 CITY-5	nt signature require I ADDRESS ST-ZIP I ADDRESS SI-ZIP I ADDRESS SI-ZIP I ADDRESS SI-ZIP I ADDRESS SI-ZIP	rd of directors. I hereby accept the a od whomens along)	appointment a	ID DIRECTO Change Change Change	PRS IN 12 Addition Addition Addition
or registered agent, or both, in the familiar with, and accept the oblication of the familiar with accept the oblication of the familiar with accept the famili	ne State of Florida. Such gations of, Section 607. The of registered agent and tills if a OFFICERS AND DIRECT. EEN H. D TERR.	n change was authorize 0505, Florida Statutes. applicable (NO CTORS DELETE DELETE DELETE	## Frogistered Age ## 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-5 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-5 3.1 TITLE 3.2 NAME 3.3 STREET 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-5 5.1 TITLE 5.2 NAME 5.1 TITLE 5.2 NAME	nt signature require I ADDRESS ST-ZIP I ADDRESS SI-ZIP I ADDRESS SI-ZIP I ADDRESS SI-ZIP I ADDRESS SI-ZIP	rd of directors. I hereby accept the a od whomens along)	appointment a	ID DIRECTO Change Change Change	PRS IN 12 Addition Addition Addition
or registered agent, or both, in the familiar with, and accept the oblication of the familiar with, and accept the familiar with accept the familiar with accept the familiar with accept the familiar with accept the f	ne State of Florida. Such gations of, Section 607. The of registered agent and tills if a OFFICERS AND DIRECT. EEN H. D TERR.	n change was authorize OSOS, Florida Statutes. applicable NO CTORS DELETE DELETE DELETE DELETE	## Frogistered Age ## 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-5 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-5 3.1 TITLE 3.2 NAME 3.3 STREET 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-5 5.1 TITLE 5.2 NAME 5.1 TITLE 5.2 NAME	nt signature require It address ST-ZIP	rd of directors. I hereby accept the a od whomens along)	appointment a	ID DIRECTO Change Change Change	PRS IN 12 Addition Addition Addition
or registered agent, or both, in the familiar with, and accept the oblices. GNATURE. Signature, typed or printed nance. Signature, typed or printed nance. BY CATHLE TOO BY, CATHLE TO	ne State of Florida. Such gations of, Section 607. The of registered agent and tills if a OFFICERS AND DIRECT. EEN H. D TERR.	n change was authorize 0505, Florida Statutes. applicable (NO CTORS DELETE DELETE DELETE	TE Frogistered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-5 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-5 3.1 TITLE 3.2 NAME 3.3 STREET 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-5 5.1 TITLE 5.2 NAME 5.3 STREET 5.1 TITLE 5.2 NAME 5.3 STREET 5.1 TITLE 5.3 NAME 5.3 STREET	nt signature require I ADDRESS ST-ZIP	rd of directors. I hereby accept the a od whomens along)	appointment a	ID DIRECTO Change Change Change	PRS IN 12 Addition Addition Addition
or registered agent, or both, in the familiar with, and accept the obling IGNATURE. Signature, typed or printed nance. Signature, typed or printed nance. PREF DP RODBY, CATHLE REEL ADDRESS 7202 NW 132N	ne State of Florida. Such gations of, Section 607. The of registered agent and tills if a OFFICERS AND DIRECT. EEN H. D TERR.	n change was authorize OSOS, Florida Statutes. applicable NO CTORS DELETE DELETE DELETE DELETE	TE Progistered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-5 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-5 3.1 TITLE 3.2 NAME 3.3 STREET 4.4 CITY-5 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-5 5.1 TITLE 5.2 NAME 5.3 STREET 5.4 CITY-5 5.5 CITY-5 5.	nt signature require It address ST-ZIP It address ST-ZIP	rd of directors. I hereby accept the a od whomens along)	appointment a	AD DIRECTO Change Change Change Change	DRS IN 12 Addition Addition Addition Addition
or registered agent, or both, in the familiar with, and accept the oblicion of the familiar with, and accept the familiar with accept the familiar with, and accept the familiar with accept the familiar with accept the fa	ne State of Florida. Such gations of, Section 607. The of registered agent and tills if a OFFICERS AND DIRECT. EEN H. D TERR.	n change was authorize OSOS, Florida Statutes. applicable NO CTORS DELETE DELETE DELETE DELETE	TE Frogistered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-5 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-5 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-5 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-5 5.1 TITLE 5.2 NAME 5.3 STREET 5.1 TITLE 5.2 NAME 5.3 STREET 5.1 TITLE 5.2 NAME 5.3 STREET 5.4 CITY-5 6.1 TITLE 6.2 NAME	nt signature require It address ST-ZIP It address ST-ZIP	rd of directors. I hereby accept the a od whomens along)	appointment a	AD DIRECTO Change Change Change Change	DRS IN 12 Addition Addition Addition Addition

SIGNATURE: Cathoen H. Rodby Cathleen H. Rodby 4-29-96 904-462-5267