NONPROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

Katherine Harris

FILED Apr 26, 1999 8:00 am Secretary of State

1	UAL REPORT 1999		Secretary of DIVISION OF CO		04-26-1999 90054 043 ****61.25	
1. Corporation			ndominium ass	oc	411914 - 90009 - 73	,
IATION,	INC.				411314	•
Principal Plac	e of Business		ing Address		A CONTRACT AND A STATE OF THE S	
SUITE 307- JACKSONAILLI 18	DOWS CIRCLE W . E FL 32256	SUH	SOUTHPOINT BLVD. E-100 KSONVILLE FL 32216	·		;
2. Principal P	Yace of Business		Aailing Address	erica in the	3. Date Incorporated or Qualified	
21	4 ate	25	C O BA	NN/NG 176	7 08/16/1985 Applied For	77
Suite, Apl.	# BIC			OW ST. EA.]
City & Stat	te 🔍		City & State	#2	5. Certificate of Status Desired 5. Certificate of Status Desired	Ţ <u>'</u>
23		28	-SACKS ON		Lee Kedhnan	┥,
Zip	Countr 25	y 29 ²	Tip 32217 [30	Country	6. Election Cempaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	1 '
24		an of Company Bouleto	rad Assault	1	10. Name and Address of New Registered Agent	7
		TERRY	BANNING- PYGT	81 Name		
MARTIN.	SONNY-	BANNING	- 1967	82 Street	Address (P.O. Box Number is Not Acceptable)	Π.
8130 BAY	AMEADOWS CIRCLE!	W- 6015 M	ORRSW STLUE	83		⊣
SUITE 30	·		211			- ∶
1ACKSON	MLLE FL 32256	SAX FR	A 32217	84 City	FL 85 Zip Code	1
11. Pursuant	to the provisions of Sec	tions 617,0502 and 617	.1508, Florida Statutes,	the above named	corporation submits this statement for the purpose of changing its registered	7 :
11. Pursuant office or a agent I a	to the provisions of Sec registered agent, or both am familiar with, and acc	tions 617.0502 and 617 a, in the State of Florida cept the obligations of, S	.1508, Florida Statutes, Such change was auth lection 617.0503, Florida	the above-named orized by the corporation Statutes.	corporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered	7
11. Pursuant office or a agent. I a SIGNATURE	$\mathbf{x} = 1.$	4 Waryou			corporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered	6
ř	Signature, typed or profest name	tions 617.0502 and 617 in the State of Florida. ept the obligations of, S an registered agent and title if in FFICERS AND DIREC	pplicable. (NOTE: Re	the above-named orized by the corporal Statutes. glettered Agent signature in 13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	1/98)
SIGNATURE	Signature, typed or profest name	of registered agent and the V is	pplicable. (NOTE: Re	gletered Agent algosture r	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
SIGNATURE	Signature, typed or probled name	of registered agent and the V is	pplicable. (NOTÉ: Re	gletered Agent signature in 13. 1,1 TITLE 1,2 NAME	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 LOWEN CARY Additional Control Cont	
SIGNATURE 12. TITLE	PD MCAFEE, T. J. 8130 BAYMEADOW	a projectured agent and title if a	pplicable. (NOTÉ: Re	gletered Agent algosture in 13. 1,1 TITLE 1.2 NAME 1.3 STREET ADDRESS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 LAWREN CARY 8130 Baymeadows CW	
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MCAFEE, T. J. 8130 BAYMEADOW JACKSONVILLE FL.	a projectured agent and title if a	ppMcable. (NOTÉ: Re TORS ☐ DELETE	13. 1,1 TITUE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 LOWEN CARY Additional Control Cont	R2E037.
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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 oath; that I am an officer or director of the coporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X

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