FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUI 1. Corporation	MENT # 753220	(3)							
	D WAY OF FLORIDA, INC.								
0									
Principal Place	of Business	Mailing Address							HORAL BIRTH 1881
307 E. 7TH /	AVENUE	307 E. 7TH AVENUE					_		
SUITE 204 SUITE 204									
TALLAHASSE	EE FL 32303-5520	TALLAHASSEE FL 32300	FOOZU					Date of Last	
						,	07/02/1980	05/16/1	
–	ace of Business	2a. Mailing Address	¬ ~ ~ ~				4. FEI Number 59-2104175		Applied For
1 26							33 2 104 173		Not Applicable Additional
2	27	, ph. 4, d.c.				5. Certificate of Status Desired	7	Required	
City & State	3	City & State					6. Election Campaign Financing	\$5.0	O May Be
3		28	,				Trust Fund Contribution		d to Fees
Zip	Country	Ζp	Cou	intry			8. This corporation has liability for intangible		199.032,
4	9. Name and Address of Current	29 Registered Agent	30	r 			Florida Statutes Yes 10. Name and Address of New Register		
	J. Hambaria Produced of Contain			81	Name				
GRANGER, THEODORE G.				82	Street A	ot Address (P.O. Box Number is Not Acceptable)			
307 EAST 7TH AVENUE					Oliootzi	100.00	is (i.e. box ito its or to it begins or		
SUITE 2				83					
TALLAHASSEE FL 32303				84	City			65 Zip	Code
11. Pursuant 1	to the provisions of Sections 617.0502 a	ind 617.1508, Florida Statute	s, the abo	ve-na	amed cor	rporat	ion submits this statement for the numose of	changing its r	egistered office
or register	red agent, or both, in the State of Florida th, and accept the obligations of, Section	i. Such change was authorize	d by the d	corpo	ration's t	board	of directors. I hereby accept the appointment	as registered	agent. I am
SIGNATURE	, ,								
	Signature, typed or printed name of registered agent ar			Agent	signature red	quired v	hen reinstating) DATI ADDITIONS/CHANGES TO OFFICERS A		DC (N.12
12.	OFFICERS AND	DELETE	13.	TI F	Т		ADDITIONS/CHANGES TO OFFICERS A	Change	Addition
NAME	ROSENBLUM, BARBARA L					C	TITO DIGUIDO II		
STREET ADDRESS				10 620562 1000500			WIS, RICHARD K 1 SE OSCEOLA AVE		1
CITY-ST-ZIP	AL DE SULLED DE			TY-ST	- ZIP	OCALA FL			
TITLE	VD	VD □DELETE 21				T/S Change Addition			Addition
NAME	221770 111011111111111111111111111111111			22 NAME HO			LMES, A. L.		
STREET ADDRESS	151 SE OSCEOLA AVE			23 STREET ADDRESS B			NNIE MINE RD		
CITY-ST-ZIP	OCALA FL		_	ITY-ST	-ZIP	BA	RTOW FL		
TITLE				31 TITLE VD				Change	☐ Addition
NAME	HOLMES, AL HONORABLE BONNIE MINE RD						LKER, H. WILLIAM JR.		1
STREET ADDRESS		BARTOW FL					O S BISCAYNE BLVD. 4900 AMI FL		
TITLE				4.1 TITLE D			11.17 P.11	Change	Addition
NAME	_			-		_	SENBLUM, BARBARA L.		
STREET ADDRESS			4.3 S				AMBLESIDE DR		
CITY-ST-ZIP	MIAMI FL					CL	EARWATER FL		
TITLE	D	T3		TLE				Change	☐ Addition
NAME				NAME			800001749	ຳນາຄ	
STREET ADDRESS	1				address	800001748003 -03/18/3601133017			
CITY-ST-ZIP	TALLAHASSEE FL	DELETE	5.4 C 6.1 Ti	ITY-ST	- ZIP		***61.25	☐ Change	Addition
NAME	D Hendry, Ted	POLLETE	6.1 II					- 31.01.No	
STREET ADDRESS	1301 W GOVERNMENT ST				ADDRESS				_
CITY-ST-ZIP	PENSACOLA FL			ITY-ST	- 1				3
14. I do hereb	by certify that the information supplied wi	ith this filing is voluntarily furni				lify for	the exemption stated in Section 119.07(3)(k)	Florida Statut	tes. 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if change I, or on an attachment with an all dress.

SIGNATURE: