2001 UNIFORM BUSINESS REPORT (UBR)

**DOCUMENT # 731633** 

1. Entity Name

FILED
Jun 18, 2001 8:00 am
Secretary of State
05-17-2001 91342 021 \*\*\*\*61.25

Principal Place of Business  Mailing Address  639 EDGEWATER DRIVE  DUNEDIN FL 34698-6916  US  2. Principal Place of Business  Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  Mailing Address  Mailing Address  DUNEDIN FL 34698-6916  US  7 6 2 3  PO NOT WRITE IN THIS SPACE  Applied F	DO NOT WRITE IN THIS SPACE  If Number	Principal Place of Business   Mailing Address   639 EDGEWATER DRIVE   639 EDGEWATER DRIVE   DUNEDIN FL 34698-6916   US   276 2 3	Principal Place of Business    639 EDCEWATER DRIVE   639 EDCEWATER DRIVE   DUNEDIN FL 34698-6916   DUNEDIN FL 34698   DUNEDIN FL 346	Principal Place of Business  639 EDCEWATER DRIVE 639 EDCEWATER DRIVE BUNEDIN FL 34698-6916 US  2. Principal Place of Dusiness  3. Mailing Address  Suite, Act. 4. etc.  City & State  City & FL Zip Code  State  FILE NOW:  FILE NOW:  Signature Speaked and inspected agent of the speaked agent and the specials (ACCTE Registered Agent) in the state of Florida.  City State  FILE NOW:  Signature Speaked and inspected agent of the speaked agent and the specials (ACCTE Registered Agent) in the state of Florida.  City State  FILE NOW:  Signature Speaked and inspected agent of the speaked agent and the speaked agent and the speaked agent and the speaked agent and speaked agent and the speaked agent and the speaked agent and speaked agent and the speaked agent and spea	Principal Place of Business   639 EDCEWATER DRIVE   639 EDCEWATER DRIVE   DINEDIN FL 34698-6916   US	Principal Place of Business   639 EDCEWATER DRIVE   639 EDCEWATER DRIVE   DINEDIN FL 34698-6916   US	Principal Place of Business 639 EDGEWATER DRIVE 639 EDGEWATER DRIV	Principal Place of Business 639 EDGEWATER DRIVE 639 EDGEWATER DR  630 EDGEWATER DR  639 EDGE	Principal Place of Business 639 EDGEWATER DRIVE 639 EDGEWATER 639	Principal Place of Business 639 EDGEWATER DRIVE BUNEDIN FL 34698-6916 US 2. Principal Place of Business 3. Mailing Address Sulfe, Apt #, etc.  2. Principal Place of Business 3. Mailing Address Sulfe, Apt #, etc.  City & State Country Country City Count		furch of the good shee	HERD, INC.		1			
DUNEDIN FL 34698-6916 US  2. Principal Place of Business  Suite, Apt. #, etc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  Street Address (P.O. Box Number is Not Acceptable)  City & FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  Signature  Signature typed or printed name of registered agent and the # applicable (NOTE Registered Agent signature regused when namestating)  OATE  FILE NOW:  Street Address (P.O. May Be  Make Check Payable to-  Trust Fund Contribution. Added to Fees.	DO NOT WRITE IN THIS SPACE  El Number	DUNEDIN FL 34698-6916 US  2. Principal Place of Business  Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  City & State  City & State  City & State  Country  Zip  Country  Zip  Country  Zip  Country  S. Certificate of Status Desired  FREEBORN, JOHN B 3636 FISHER ROAD  PALM HARBOR FL 34683  City  FILE NOW:  Signate Address (PO. Box Number is Not Acceptable)  Trust Fund Contribution.  FILE NOW:  FILE NOW:  FILE NOW:  FILE NOW:  Signature  9. Election Campaign Financing Trust Fund Contribution.  Added to Fees.  Added to Fees.  Make  CHATRIAN:  Trust Fund Contribution.  CHATRIAN:  TREESIDENT OFFICERS AND DIRECTORS  Trust Fund Contribution.  Signature  CHATRIAN:  TREESTIERN JA698  The PRESIDENT Obeles  The MAKE UNDER Address  CITY-SIZE  UNDED IN FL 34698  The WARE UNDED IN FL 34698  The Obeles  The WARE UNDED IN FL 34698  The COOK, THOMAS M;  Date of Change   Addition  The MAKE UNDED IN FL 34698  The COOK, THOMAS M;  The MAKE UNDED IN FL 34698  The COOK, THOMAS M;  The MAKE UNDED IN FL 34698  The COOK, THOMAS M;  The MAKE UNDED IN FL 34698  The COOK, THOMAS M;  The MAKE UNDED IN FL 34698  The COOK, THOMAS M;  The MAKE UNDED IN FL 34698  The COOK, THOMAS M;  The Cook of Change   Addition  The MAKE UNDED IN FL 34698  The COOK, THOMAS M;  The COOK	DUNEDIN FL 34698-6916 US  2. Principal Place of Business  3. Mailing Address  Suite, Apt. #, etc.  City & State  C	DUNEDIN FL 34698-6916 US  2. Principal Place of Business  3. Mailing Address  Suite, Apt. #, etc.  City & State  City & State  City & State  City & State  Country  Zip  Country  Zip  Country  Zip  Country  Specification of Status Desired  4. FEI Number  59-1090703  Applied For  Not Applied For	DUNEDIN FL 34698-6916 US  2. Principal Place of Business  3. Mailing Address  Suite, Apt. 4, etc.  City & State  City & State  City & State  Country  Zip  Country  Zip  Country  Signature of Status Desired  4. FEI Number  59-1090703  Applied For  Not Applied For  Signature of Status Desired  8. 75 Additional  Fee Required  Fee Required  Street Address (P.O. Box Number is Not Acceptable)  Signature of Address of Nor Registered Agent  FLE NOW:  9. Bection Campaign Financing  Trust Fund Contribution.  10. GIFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  10. GIFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  10. GIFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  10. GIFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  10. GIFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  10. GIFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  10. GIFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  10. GIFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  10. GIFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  10. GIFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  10. GIFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  10. GIFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  10. GIFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  10. GIFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  12. ADDITIONS AND CHARGES TO OFFICERS AND DIRECTORS IN 10  13. GIFICERS AND DIRECTORS  14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  15. GIFICERS AND DIRECTORS  16. TORROW THE ADDITIONS AND CHARGES TO OFFICERS AND DIRECTORS IN 10  17. TORROW THE ADDITI	DUNEDIN FL 34698-6916 US  2. Principal Place of Business  3. Mailing Address  Suite, Apt. 4, etc.  City & State  City & State  City & State  Country  Zip  Country  Zip  Country  Signature of Status Desired  4. FEI Number  59-1090703  Applied For  Not Applied For  Signature of Status Desired  8. 75 Additional  Fee Required  Fee Required  Street Address (P.O. Box Number is Not Acceptable)  Signature of Address of Nor Registered Agent  FLE NOW:  9. Bection Campaign Financing  Trust Fund Contribution.  10. GIFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  10. GIFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  10. GIFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  10. GIFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  10. GIFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  10. GIFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  10. GIFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  10. GIFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  10. GIFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  10. GIFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  10. GIFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  10. GIFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  10. GIFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  10. GIFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  12. ADDITIONS AND CHARGES TO OFFICERS AND DIRECTORS IN 10  13. GIFICERS AND DIRECTORS  14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  15. GIFICERS AND DIRECTORS  16. TORROW THE ADDITIONS AND CHARGES TO OFFICERS AND DIRECTORS IN 10  17. TORROW THE ADDITI	DUNEDIN FL 34698-6916 US  2. Principal Place of Business  3. Mailing Address  Suite, Apt. #, etc.  City & State  Country  Zip  Country  Zip  Country  5. Certificate of Status Desired  8. 75 Additional  For Required  FREEBORN, JOHN B  3636 FT SHER ROAD  PALM HARBOR FL 34683  City  Signature  S	DUNEDIN FL 34698-6916 US  2. Principal Place of Business  3. Mailing Address  Suite, Apt. #, etc.  City & State  City & FL  Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Fiorida.  SIGNATURE  Equations hoped or printed named diagramed agent and the septiculate.  (In OTE Registered Agent signature separate sepa	DUNEDIN FL 34698-6916 US  2. Principal Place of Business  3. Mailing Address  Sulfe, Apr. #, etc.  City & State  Country  Zip  Country  5. Certificate of Status Desired  Fee Reculated  Fee Reculated  Fee Reculated  Fee Reculated  Fee Reculated  Fee Reculated  FILE NOW:  Substantial Statement for the purpose of changing its registered date of registered agent, or both, in the state of Fiorida.  SIGNATURE  Supposes Your Fee Reculated  FILE NOW:  Substantial Statement for the purpose of changing its registered date or registered agent, or both, in the state of Fiorida.  SIGNATURE  Supposes Your Fee Reculated  SIGNATURE  Supposes Your Fee Reculated  SIGNATURE  Supposes Your Fee Reculated  SIGNATURE  Suppose Your Fee Reculated  SIGNATURE  Supposes Your Fee Reculated  SIGNATURE  SUPPOSE YOUR FEE RECTOR SAND DIRECTORS IN 10  Addition  SIGNATURE  SUPPOSE YOUR SAND DIRECTORS IN 10  SIGNATURE  SUPPOSE YOUR PARTICIS   Debte International Changes of Reculated Suppose International Changes International Chan	DUNEDIN FL 34698-6916 US  2. Principal Place of Business  3. Mailing Address  Suite, Apt. #, etc.  DO NOT WRITE IN THIS SPACE  City & State  Applied For Not Applied F	Principal Pla	<del></del>	<del></del>	<del></del>				
Suite, Apt. #, etc.  Suite, Apt. #, etc.  DO NOT WRITE IN THIS SPACE  City & State  Country  Solutional Fee Required Fee Required Fee Required Fee Required Fee Required Fee Required  To Name and Address of New Registered Agent  Name  FREEBORN, JOHN B  3636 FISHER ROAD PALM HARBOR FL 34683  City  FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florids.  SIGNATURE  Signature, typed or prised name of registered agent and the if applicable  9. Election Campaign Financing File NOW:  Trust Fund Contribution.  Added to Fees  Department of State	Applied For Not Applied For Not Applied For Not Applicable stifficate of Status Desired \$8.75 Additional Fee Required Imme and Address of New Registered Agent (Number is Not Acceptable)  FL Zip Code  It, or both, in the state of Florida.  Make Check Payable to Department of State  INS/CHANGES TO OFFICERS AND DIRECTORS IN 10	Sufie, Apl. #, etc.    City & State	Suite, Apt. 6, etc.    Suite, Apt. 6, etc.   Suite, Apt. 6, etc.   DO NOT WRITE IN THIS SPACE	Suite, Apt. •, etc.  Suite, Apt. •, etc.  Suite, Apt. •, etc.  City & State  Suite, Application  FOUR Country  Country  Country  Country  Sold	Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  Country  Country  Solution of Status Desired  St	Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  Country  Country  Solution of Status Desired  St	Suite, Apt. 6, etc.    Suite, Apt. 6, etc.   Suite, Apt. 6, etc.   DO NOT WRITE IN THIS SPACE	Suite, Apt. etc.    Suite, Apt. etc.   Suite, Apt. etc.   DO NOT WRITE IN THIS SPACE	Suite, Apt. #, etc.    Suite, Apt. #, etc.   DO NOT WRITE IN THIS SPACE	Suite, Apt. #, etc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  City & State  Country  Country  Zip  Country  Zip  Country  S. Certificate of Status Desired  \$8.75 Additional Fee Required  Fee Required  Fee Required  Free Regulared  Free Regulared  Free Regulared  Street Address (P.O. Box Number is Not Acceptable)  Free Regulared  Free Regulared  Free Regulared  Free Regulared  Street Address (P.O. Box Number is Not Acceptable)  Free Regulared  Free Regula	DUNEDI		DUNEDIN FL 34			76	23	
City & State  City & State  City & State  City & State  A FEI Number 59-1090703  Not Applied For North Applied For Red Country  Experiment of Status Desired Status Desired See Required Fee Required Fe	Applied For Not Applied For Not Applied For Not Applicable stifficate of Status Desired \$8.75 Additional Fee Required Imme and Address of New Registered Agent (Number is Not Acceptable)  FL Zip Code  It, or both, in the state of Florida.  Make Check Payable to Department of State  INS/CHANGES TO OFFICERS AND DIRECTORS IN 10	City & State  Secretificate of Status Dosired  Name  Street Address (P.O. Box Number is Not Acceptable)  Site	City & State  Country  Country  Country  Country  Country  S. Certificate of Status Desired  S8.75 Additional Fee Required  S. Name and Address of Current Registered Agent  Name  TREEBORN, JOHN B  3636 FISHER ROAD PALM HARBOR FL 34683  City  FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature by the first of the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature by the first of the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature by the first of the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature by the first of the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature by the first of the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature by the first of the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature by the first of the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE	City & State  City & State  City & State  City & State  Country  C	City & State  City & State  City & State  City & State  Country  C	City & State  City & State  City & State  City & State  Country  C	City & State  Country  Country  Country  Country  S. Certificate of Status Desired  S8.75 Additional Fee Required  S. Marne and Address of Current Registered Agent  7. Name and Address of New Registered Agent  Name  FREEBORN, JOHN B  3636 FISHER ROAD  PALM HARBOR FL 34683  City  FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE	City & State  Country  Country  Country  Country  Country  Country  Country  S. Certificate of Status Desired  \$8.75 Additional Fee Required  S. Ref. Additional Fee Required  Fee Required  REEBORN, JOHN B  3636 FISHER ROAD  PALM HARBOR FL 34683  City  FL  Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signama freed or prised and of Agestered agent are the Agelcable  ONE  FILE NOW:  9. Election Campaign Financing Free Required  FEE-18-\$61:25  Trust Fund Contribution.  Added to Fees  Department of State  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITL MARCH REPAIRS  SIRET ADDRESS  SIRET ADDRESS  TITLE  WARNER, JUDITH 639 EDGEMATER DR  UNDEDIN FL 34698  TITLE  WARNER, JUDITH 639 EDGEMATER DR  UNDEDIN FL 34698  TITLE  UNDEDIN FL 34698  TITLE  UNDEDIN FL 34698  TITLE  WARNER, JUDITH 639 EDGEMATER DR  SIRET ADDRESS  SIRET ADD	City & State  Country  Country  Country  Country  State  Status Desired  \$8.75 Additional Fee Required  FREEBORN, JOHN B  36.36 FISHER ROAD  PALM HARBOR FL 34683  City  FL  Zip Code  Street Address (P.O. Box Number is Not Acceptable)  City  FL  Zip Code  Street Address (P.O. Box Number is Not Acceptable)  City  FL  Zip Code  Street Address (P.O. Box Number is Not Acceptable)  DATE  Street Address (P.O. Box Number is Not Acceptable)  DATE  Street Address (P.O. Box Number is Not Acceptable)  DATE  Street Address (P.O. Box Number is Not Acceptable)  DATE  Street Address (P.O. Box Number is Not Acceptable)	City & State  City & State  City & State  City & State  Country  Country  Country  Country  Country  Country  Country  Some and Address of Current Registered Agent  To Name and Address of New Registered Agent  TREEBORN, JOHN B  3636 FISHER ROAD  PALM HARBOR FL 34683  City  FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  FILE NOW:  9. Election Campaign Financing Trust Fund Contribution.  Added to Fees  Name  Added to Fees  Make Check Payable to- Department of State  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE  WARD, REV. PATRICK J.  Gay EDCEWATER DR DUNEDIN FL 34698  TITLE  WARNER, JUDITH  WAGdillon  WARNER, JUDITH  WARNER, JUDITH  WAGdillon  WARNER, JUDITH  WAGdillon  WARNER, JUDITH  WAGGILLON  WARD, REV. PATRICK DR  WARNER, JUDITH  WARNER, JUDITH  WARNER, JUDITH  WARNER, JUDITH  WARNER, JUDITH  WAGGILLON  WARD, REV. PATRICK DR  WARNER, JUDITH  WARNER, JUDITH  WARNER, JUDITH  WARNER, JUDITH  WAGGILLON  WARD, REV. PATRICK DR  WARD, REV. PATRICK DR  WAGGILLON  WARD, REV. PATRICK DR  WARNER, JUDITH  WARNER, JUDITH  WAGGILLON  WARD, REV. PATRICK DR  WAGGILLON  WARD, REV. PATRICK DR  WARD, REV. PA	2. Principal	Place of Business	3. Mailing Address	<u> </u>				
Zip Country Zip Country 5. Certificate of Status Desired \$8.75 Additional Fee Required  6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent  FREEBORN, JOHN B  3636 FISHER ROAD  PALM HARBOR FL 34683  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)  DATE  FILE NOW:  9. Election Campaign Financing Trust Fund Contribution. — Added to Fees — Department of State	59-1090703   Not Applicable   Prifficate of Status Desired   \$8.75 Additional   Fee Required   Fee Required   Fee Required   Fluid   Fee Required   Fundament   Fu	Zip Country Zip Country 5. Certificate of Status Desired \$8.775 Additional Fee Required  6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent 7. Name and Address of New Registered Agent 7. Name and Address of New Registered Agent 8. Sirect Address (P.O. Box Number is Not Acceptable)  FREEBORN, JOHN B 3636 FISHER ROAD 7. Name and Address of New Registered Agent 8. Sirect Address (P.O. Box Number is Not Acceptable)  City FL Zip Code 7. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SiGNATURE Signature, trood or prised registered agent and the 4 applicable (NOTE Registered Agent Signature Registered agent, or both, in the state of Florida.  FILE NOW: 9. Election Campaign Financing 4. Added to Fees Department of State 7. Trust Fund Contribution. Added to Fees Department of State 7. Departmen	Zip Country Zip Country 59-1090703 Not Applicable \$8.75 Additional Fee Required    6. Name and Address of Current Registered Agent    7. Name and Address of New Registered Agent    FREEBORN, JOHN B 3636 FISHER ROAD   PALM HARBOR FL 34683	Zip Country	Zip Country Zip Country 5. Certificate of Status Desired   \$8.75 Additional Fee Required   \$8.	Zip Country Zip Country 5. Certificate of Status Desired   \$8.75 Additional Fee Required   \$8.	Zip Country Zip Country 59-1090703 Not Applicable \$8.75 Additional Fee Required  6. Name and Address of Current Registered Agent 7, Name and Address of New Registered Agent FREEBORN, JOHN B 3636 FISHER ROAD  PALM HARBOR FL 34683  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature Troops or private rame of registered agent and the applicable (MOTE Registered Agent registered agent, or both, in the state of Florida.  FILE NOW:  FEE-IS-\$61:25	Zip Country Zip Country 59-1090703 Not Applicable \$8,75 Additional Fee Required  6. Marne and Address of Current Registered Agent 7, Name and Address of New Registered Agent PREEBORN, JOHN B 3636 FISHER ROAD  PALM HARBOR FL 34683  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE Byrains treated agent and the # applicable (MOTE Registered Agent agentals required agent, or both, in the state of Florida.  SIGNATURE FILE NOW: 9. Election Compalign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Date Added to Feee Department of State  10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  11. PRESIDENT Delete TILE NAME SIRET ADDRESS CITY-SI-2P UNED IN FL 34698 CITY-SI-2P UNED IN FL 346	Country   Zip   Country   S. Certification of Status Desired   \$8.75 Additional Fee Required	Zip Country Zip Country 5, Certificate of Status Desired	Suite, Ap	ol. #, etc.	Suite, Apt. #, etc.		DO NOT WRI	TE IN THIS SPACE		
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent  FREEBORN, JOHN B 3636 FISHER ROAD PALM HARBOR FL 34683  City  FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  FILE NOW:  9. Election Campaign Financing  \$5. Certificate of Status Desired  Fee Required  Free Required  To Name and Address of New Registered Agent  FREE BORN   Name and Address of New Registered Agent  FREE BORN   Name and Address of New Registered Agent  FREE BORN   Name and Address of New Registered Agent  Free Required  To Name and Address of New Registered Agent  Free Required  To Name and Address of New Registered Agent  Free Required  To Name and Address of New Registered Agent  Free Required  To Name and Address of New Registered Agent  Name  Free Required  To Name and Address of New Registered Agent  Name  To Name and Address of New Registered Agent  Name  To Name and Address of New Registered Agent  Free Required  To Name and Address of New Registered Agent  Name  To Name and Address of New Registered Agent  Name  To Name and Address of New Registered Agent  Name  To Name and Address of New Registered Agent  Name  Name  To Name and Address of New Registered Agent  Name  To Name and Address of New Registered Agent  Name  Name  To Name and Address of New Registered Agent  Name  Name  To Name and Address of New Registered Agent  Name  Name  Name  Name  To Name and Address of New Registered Agent  Name  Name  Name  To Name and Address of New Registered Agent  Name  Name  Name  Name  To Name and Address of New Registered Agent  Name  Name  Name  Name  Name  To Name and Address of New Registered Agent  Name  Name  Name  Name  Name  Name  Not Address of New Registered Agent  Name  Not Address of New Registered Agent  Name  Name  Not Address of New Registered Agent  Name  Not Address of New Registered Agent  Name  Not Address of New Registered Agent  Name  Not Address of New Reg	Fee Required  Imme and Address of New Registered Agent  In Number is Not Acceptable)  FL Zip Code  In, or both, in the state of Florida.  Make Check Payable to  Department of State  INS/CHANGES TO OFFICERS AND DIRECTORS IN 10	S. Certificate of Status Desired   Fee Required   F	6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent 7. Name and Address of New Registered Agent  FREEBORN , JOHN B 3636 FISHER ROAD PALM HARBOR FL 34683  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature. Troad or private name of ingressed agent and the 4 applicable (INOTE Registered Agent agents when reintrating)  ONTE  FILE NOW:  FILE NOW:  9. Election Campaign Financing Added to Feee  Department of State  ONTE  Trust Fund Contribution.	6. Name and Address of Current Registered Agent  7. Name and Address of New Registered Agent  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  8. The above named entity submits this statement for the purpose of changing its registered Agent agreement agent ag	6. Name and Address of Current Registered Agent  7. Name and Address of New Registered Agent  8. Sired Address (P.O. Box Number is Not Acceptable)  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  8. Signature  8. Election Campaign Financing FILE NOW:  9. Election Campaign Financing Trust Fund Contribution. Address in the submit of State  10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  10. CHATRMAN: FERATIC: Delde 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  10. PRESIDENT	6. Name and Address of Current Registered Agent  7. Name and Address of New Registered Agent  8. Sired Address (P.O. Box Number is Not Acceptable)  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  8. Signature  8. Election Campaign Financing FILE NOW:  9. Election Campaign Financing Trust Fund Contribution. Address in the submit of State  10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  10. CHATRMAN: FERATIC: Delde 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  10. PRESIDENT	6. Name and Address of Current Registered Agent  7. Name and Address of New Registered Agent  7. Name and Address of New Registered Agent  7. Name and Address of New Registered Agent  8. Street Address (P.O. Box Number is Not Acceptable)  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Suprame. Troad or privated name of inguizated agent and the viapolicable (INOTE Registered Agent agents when reintrating)  ONTE  FILE NOW:  9. Election Campaign Financing Trust Fund Contribution.	5. Certificate of Status Desired	S. Certificate of Status Desired	5. Certificate of Status Desired	City & Sta	ate	City & State			03	<del>                                     </del>	le
FREEBORN, JOHN B 3636 FISHER ROAD PALM HARBOR FL 34683  City  FL  Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent atgrature required when reinstrating)  OATE  FILE NOW:  9. Election Campaign Financing \$5.00 May Be Added to Fees  Department of State	FL Zip Code  It, or both, in the state of Florida.  Make Check Payable to  Department of State  INS/CHANGES TO OFFICERS AND DIRECTORS IN 10	FREEBORN, JOHN B 3636 FISHER ROAD PALM HARBOR FL 34683  City FL Zip Code  5. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature Typed or printed name of registered agent and the # applicable (NOTE: Registered Agent spinature required when reintrating)  DATE  FILE NOW:  9. Election Campaign Financing Added to Fees Department of State  Trust Fund Contribution.  Added to Fees Department of State  CHATRMAN: TESTIC: Delete NAME  WARD, REV. PATRICK J  639 EDGEWATER DR  UNDEIN FL 34698  THE NAME  WARNER, JUDITH  STREET ADDRESS  CITY-ST-ZIP  UTCE PRESIDENT  WARNER, JUDITH  STREET ADDRESS  CITY-ST-ZIP  CHange Addition  Change Addition  Change Addition	FREEBORN, JOHN B 3636 FISHER ROAD PALM HARBOR FL 34683  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florids.  SIGNATURE  FILE NOW:  9. Election Campaign Financing FEE-IS-\$61.26  10. OFFICERS AND DIRECTORS  ITUSE Fund Contribution. Added to Fees Department of State  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE WARD, REV. PATRICK J AGGION WARD, REV. PATRICK J AGGION WARD, REV. PATRICK J SIREFADORES CITY-ST-ZIP UNDED IN FL 34698  TITLE WARRER, JUDITH WARRER	FREEBORN, JOHN B 3636 FISHER ROAD PALM HARBOR FL 34683  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  SIGNATURE  FILE NOW:  9. Election Campaign Financing Trust Fund Contribution. Added to Fees Department of State  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE NAME WARD, REV. PATRICK J G39 EDGEWATER DR UNED IN FL 34698  TITLE WARNER, JUDITH G39 EDGEWATER DR UNED IN FL 34698  TITLE WARNER, JUDITH G39 EDGEWATER DR UNED IN FL 34698  TITLE WARNER, JUDITH G39 EDGEWATER DR UNED IN FL 34698  TITLE WARNER, JUDITH G39 EDGEWATER DR UNED IN FL 34698  TITLE WARNER, JUDITH G39 EDGEWATER DR UNED IN FL 34698  TITLE WARNER, JUDITH G39 EDGEWATER DR UNED IN FL 34698  TITLE WARE SIRETADORESS G39 EDGEWATER DR UNED IN FL 34698  TITLE WARE G39 EDGEWATER DR UNED IN FL 34698  TITLE WARE SIRETADORESS G39 EDGEWATER DR UNED IN FL 34698  TITLE WARE SIRETADORESS G39 EDGEWATER DR UNED IN FL 34698  TITLE SIRETADORESS G39 EDGEWATER DR UNED IN FL 34698  TITLE SIRETADORESS G39 EDGEWATER DR UNED IN FL 34698  TITLE SIRETADORESS G39 EDGEWATER DR UNED IN FL 34698  TITLE SIRETADORESS G39 EDGEWATER DR UNED IN FL 34698  TITLE SIRETADORESS G39 EDGEWATER DR UNED IN FL 34698  TITLE SIRETADORESS G39 EDGEWATER DR UNED IN FL 34698  TITLE SIRETADORESS G39 EDGEWATER DR UNED IN FL 34698  TITLE SIRETADORESS G39 EDGEWATER DR UNED IN FL 34698  TITLE SIRETADORESS G39 EDGEWATER DR UNED IN FL 34698  TITLE SIRETADORESS G39 EDGEWATER DR UNED IN FL 34698  TITLE SIRETADORESS G39 EDGEWATER DR UNED IN FL 34698  TITLE SIRETADORESS G39 EDGEWATER DR UNED IN FL 34698  TITLE SIRETADORESS G39 EDGEWATER DR UNED IN FL 34698  TITLE SIRETADORESS G39 EDGEWATER DR UNED IN FL 34698  TITLE SIRETADORESS G39 EDGEWATER DR UNED IN FL 34698  TITLE SIRETADORESS G39 EDGEWATER DR UNED IN FL 34698  TITLE SIRETADORESS G39 EDGEWATER DR UNED IN FL 34698  TITLE SIRETADORESS G39 EDGEWATER DR UNED IN FL 34698  TITLE SIRETA	FREEBORN, JOHN B 3636 FISHER ROAD PALM HARBOR FL 34683  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  FILE NOW:  FILE NOW:  9. Election Comparing Financing Trust Fund Contribution.	FREEBORN, JOHN B 3636 FISHER ROAD PALM HARBOR FL 34683  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  FILE NOW:  FILE NOW:  9. Election Comparing Financing Trust Fund Contribution.	FREEBORN, JOHN B 3636 FISHER ROAD PALM HARBOR FL 34683  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florids.  SIGNATURE  SIGNATURE  FILE NOW:  9. Election Campaign Financing FEE-IS-\$61:26  10. OFFICERS AND DIRECTORS  Trust Fund Contribution.	FREEBORN, JOHN B 3636 FISHER ROAD PALM HARBOR FL 34683  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature. Troad or privated named of registered agent and their accitable (NOTE Registered Agent agreement agents are required from agreement agents and their accitable (NOTE Registered Agent agreement registered agent, or both, in the state of Florida.  FILE NOW:  FILE NOW:  9. Election Campaign Financing Free-Is-\$61:26=	FREEBORN, JOHN B 3636 FISHER ROAD PALM HARBOR FL 34683  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature Typed or private region of registered agent and the # applicable (NOTE Registered Agent synature required when reintature) DATE  FILE NOW:  9. Election Campaign Financing \$5.00 May Be Make Check Payable to Department of State  Trust Fund Contribution. Added to Fees Department of State  10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE WARD, REV. PATRICK J NAME SIREFADORESS CITY-ST-ZIP PRESIDENT Delete NAME WARD, REV. PATRICK J Oblide NAME SIREFADORESS CITY-ST-ZIP STATE DRESS CITY-ST-ZIP CROOKS, THOMAS M. CROOK, THOMAS M. CROOKS, THOMAS M. CROOKS THOMAS M. CROOKS THOMAS M. CROOKS THOMAS M. CROOKS THOMAS M. CROOK	FREEBORN, JOHN B 3636 FISHER ROAD PALM HARBOR FL 34683  City  City  FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature hood or printed name of registered agent and title 4 applicable (NOTE Registered Agent signature registered agent, or both, in the state of Florida.  FILE NOW:  9. Election Campaign Financing Trust Fund Contribution. Added to Fees  Pepartment of State  10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE WARD, REV. PATRICK J 639 EDGEWATER DR STREET ADDRESS GIV-ST-ZP TUNE DIN FL 34698  TITLE WARNER, JUDITH 639 EDGEWATER DR GIV-ST-ZP TUNE VICE PRESIDENT  Obeles  TITLE  WARNER, JUDITH 639 EDGEWATER DR GIV-ST-ZP TUNE VICE PRESIDENT  Obeles  TITLE  WARNER, JUDITH 639 EDGEWATER DR GIV-ST-ZP TUNE VICE PRESIDENT  Obeles  NAME Change Addition  City-ST-ZP TUNE Change Addition  City-ST-ZP Change Addition	Zip	Country	Zip	Country	5. Certificate of Status Desired			
Street Address (P.O. Box Number is Not Acceptable)  Street Address (P.O. Box Number is Not Acceptable)  City  FL  Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature. Proof or printed name of registered agent and title if applicable.  (NOTE: Registered Agent aignature required when reinstating)  OATE  FILE NOW:  9. Election Campaign Financing  Trust Fund Contribution.  Added to Fees.  Department of State	FL Zip Code  If, or both, in the state of Florida.  Be Make Check Payable to Department of State  INS/CHANGES TO OFFICERS AND DIRECTORS IN 10	Signature  Signature  Signature typed or prired name of registered agent and title if applicable  The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  Signature  Signature typed or prired name of registered agent and title if applicable  FILE NOW:  Signature typed or prired name of registered agent and title if applicable  (NOTE Registered Agent signature required when reintrating)  DATE  FILE NOW:  Signature typed or prired name of registered agent and title if applicable  (NOTE Registered Agent signature required when reintrating)  Added to Fool  Department of State  Trust Fund Contribution.  Added to Fool  Department of State  CHATRMAN: TESATIIC:  WARD, REV. PATRICK J  SIRET ADDRESS  GTY ST-2IP  TILE  WARD, REV. PATRICK J  G39 EDGEWATER DR  SIRET ADDRESS  CHY ST-2IP  WARNER, JUDITH  SIRET ADDRESS  SIRET ADDR	Street Address (P.O. Box Number is Not Acceptable)  Street Address (P.O. Box Number is Not Acceptable)  City   FL   Zip Code  8. The above named entity submits this statement for the purpose of changing its registered effice or registered agent, or both, in the state of Florida.  SIGNATURE  Signature   Si	FILE NOW:  FILE NOW:  FILE NOW:  FEE-18-\$61:25 =	FILE NOW:  FILE NOW:  FEE-18-\$61:25	FILE NOW:  FILE NOW:  Signature  Signature  FILE NOW:  FEE-18-\$61:25  OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  WARD, REV. PATRICK J  SIREFADORESS CITY-St-ZP  UNDED IN FL  34698  Sireet Address (P.O. Box Number is Not Acceptable)  FL  Zip Code  City  FL  Zip Code  City  FL  Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature typed or primed name of registered agent and title # Applicable  (MOTE Registered Agent algustum required when reconstancy)  PALE  FILE NOW:  Signature typed or primed name of registered agent, or both, in the state of Florida.  DATE  Make Check Payable to Delete  Title  WARD, REV. PATRICK J  SIREFIADORESS CITY-St-ZP  UNDED IN FL  34698  SIREFIADORESS CITY-St-ZP  UNCE PRESIDENT  Delete  TITLE  WARNER, JUDITH  639 EDGEWATER DR  SIREFIADORESS CITY-St-ZP  UNDED IN FL  34698  GIY-St-ZP  CROOK, THOMAS M.  SIREFIADORESS CITY-St-ZP  UNDED IN FL  34698  GIY-St-ZP  GIY-St-ZP  GIY-St-ZP  GIY-St-ZP  UNDED IN FL  34698  GIY-St-ZP  GIY-St-ZP  GIY-St-ZP  GIY-St-ZP  UNDED IN FL  34698  GIY-St-ZP  GIY	STREE BORN, JOHN B 3636 FISHER ROAD PALM HARBOR FL 34683  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature, troops or private name of registered agent and this * applicable*  (NOTE Registered Agent agreement from both, in the state of Florida.  SIGNATURE  FILE NOW:  FILE NOW:  9. Election Campaign Financing Trust Fund Contribution.	STREE BORN, JOHN B 3636 FISHER ROAD PALM HARBOR FL 34683  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature, typed or phrase rate of registered agent and this a spelicable (NOTE Registered Agent algorithm registered agent, or both, in the state of Florida.  SIGNATURE  FILE NOW:  9. Election Compaign Financing Trust Fund Contribution. Added to Fees Department of State  10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE WARD, REV. PATRICK J Added to Fees SIREHADORESS CITY-ST-ZIP UNEDITOR L 34698  TITLE NAME WARNER, JUDITH WARN	FREEBORN, JOHN B 3636 FISHER ROAD PALM HARBOR FL 34683  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature, hood or pirated name of registered agent and title # applicable (NOTE Registered Agent algorator required when reintrature)  FILE NOW:  9. Election Campaign Financing Trust Fund Contribution.	Street Address (P.O. Box Number is Not Acceptable)  Street Address (P.O. Box Number is Not Acceptable)  City   FL   Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature, trood or printed name of registered apent and title if applicable. (NOTE Registered Agent appeared when reinstating)  PALE   NOW:   9. Election Campaign Financing   \$5.00 May Be   Make Check Payable to   Department of State    10.   OFFICERS AND DIRECTORS   11.   ADDITIONS/CHANGES TO OFFICERS   11.   ADDITIONS/CHANGES TO OFFICERS   11.		6. Name and Address of Current	Registered Agent	None		Registered Agent		7
PALM HARBOR FL 34683  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature. Typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent atgrature required when reinstating)  PALM HARBOR FL 34683  City FL Zip Code  NOTE: Registered Agent agent, or both, in the state of Florida.  SIGNATURE  Signature. Typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent atgrature required when reinstating)  PALE  FILE NOW:  9. Election Campaign Financing \$5.00 May Be Make Check Payable to  Trust Fund Contribution. Added to Fees  Department of State	Make Check Payable to  Department of State  INS/CHANGES TO OFFICERS AND DIRECTORS IN 10	PALM HARBOR FL 34683    City   FL   Zip Code	PALM HARBOR FL 34683  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature, hower or privated name of inguisated agent and the it applicable (NOTE Registered Agent agreement inguisated them multitating)  PELE NOW:  FILE NOW:  9. Election Campaign Financing Inst Fund Contribution. Added to Fees Department of State  10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE WARD, REV. PATRICK J  639 EDGEWATER DR  DUNEDIN FL 34698  TITLE WARNER, JUDITH  639 EDGEWATER DR  DUNEDIN FL 34698  TITLE WARNER, JUDITH  639 EDGEWATER DR  DUNEDIN FL 34698  TITLE WARNER, JUDITH  639 EDGEWATER DR  DUNEDIN FL 34698  TITLE WARNER, JUDITH  639 EDGEWATER DR  DUNEDIN FL 34698  TITLE WARNER, JUDITH  639 EDGEWATER DR  DUNEDIN FL 34698  TITLE WARNER, JUDITH  639 EDGEWATER DR  DUNEDIN FL 34698  TITLE WARNER, JUDITH  CROOK, THOMAS M.  STRET ADDRESS  639 EDGEWATER DR  DINEDIN FL 34698  TITLE WICE PRESIDENT Delete  TITLE  CROOK, THOMAS M.  STRET ADDRESS  STRET	PALM HARBOR FL 34683    City   FL   Zip Code	PALM HARBOR FL 34683    City   FL   Zip Code	PALM HARBOR FL 34683    City   FL   Zip Code	PALM HARBOR FL 34683  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature trood or privated name of inquisited agent and tible it applicable (INOTE Registered Agent agreement agent and man ministrating)  PRILE NOW:  FILE NOW:  9. Election Campaign Financing Added to Fees Department of State  10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE WARD, REV. PATRICK J HAME STREET ADDRESS CITY-ST-ZIP  TITLE WARD, REV. PATRICK J STREET ADDRESS CITY-ST-ZIP  TITLE WARNER, JUDITH  639 EDGEWATER DR  DUNEDIN FL 34698  TITLE WARNER, JUDITH  639 EDGEWATER DR  DUNEDIN FL 34698  TITLE WARNER, JUDITH  639 EDGEWATER DR  DUNEDIN FL 34698  TITLE WARNER, JUDITH  639 EDGEWATER DR  DUNEDIN FL 34698  TITLE WARNER GROW, THOMAS M.  STREET ADDRESS  GROW, THOMAS M.  STREET ADDRESS  GROW, THOMAS M.  STREET ADDRESS	PALM HARBOR FL 34683  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature, broad or primed name of registered agent and the if applicable (NOTE Registered Agent algebrane required	PALM HARBOR FL 34683    City	PALM HARBOR FL 34683  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature, typed or pirited name of registered agent and this a applicable (NOTE Registered Agent agent agent when resonately)  PALM HARBOR FL 2ip Code  SIGNATURE  Signature, typed or pirited name of registered agent and this a applicable (NOTE Registered Agent agent agent when resonately)  PALM HARBOR FL Zip Code  OATE  FILE NOW:  SIGNATURE  Signature, typed or pirited name of registered agent and this a applicable (NOTE Registered Agent agent agent when resonately)  PALM HARBOR FL Zip Code  OATE  SIGNATURE  Signature, typed or pirited name of registered agent and this a applicable (NOTE Registered Agent agent agent when resonately)  OATE  FILE NOW:  SIGNATURE  Signature, typed or pirited name of registered agent, or both, in the state of Florida.  OATE  Added to Fees  Department of State  TRUE  WARD, REV. PATRICK J  SIRET ADDRESS  CITY-SI-ZIP  TITLE  PRESIDENT  OBelete  TITLE  WARNER, JUDITH  SIRET ADDRESS  CITY-SI-ZIP  TITLE  WARNER, JUDITH  SIRET ADDRESS  CITY-SI-ZIP  TITLE  WARNER, JUDITH  SIRET ADDRESS  CITY-SI-ZIP  TITLE  OCHAIGNER  STRET ADDRESS  CITY-SI-ZIP  TITLE  OCHAIGNER  STRET ADDRESS  CITY-SI-ZIP  TITLE  OCHAIGNER  STRET ADDRESS  CITY-SI-ZIP  Chaigne Addition			·				<del>-</del>	-
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature. Typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  PL  Signature. Typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  PATE  FILE NOW:  9. Election Campaign Financing  \$5.00 May Be  Make Check Payable to  Department of State	Make Check Payable to  Department of State  INS/CHANGES TO OFFICERS AND DIRECTORS IN 10	SIGNATURE  Signature. Vivoed or printed name of registered agent and title of applicable  FILE NOW:  FILE NOW:  9. Election Campaign Financing Trust Fund Contribution.  FEE-16-\$61:25  Trust Fund Contribution.  OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TRUE CHATRMAN: FEATURE: WARD, REV. PATRICK J NAME WARD, REV. PATRICK J NAME WARD, REV. PATRICK J SIRET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE WARNER, JUDITH 639 EDGEWATER DR DUNEDIN FL	8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Floride.  SIGNATURE    Signature   Typed or prised named of registered agent and the # applicable   (NOTE Registered Agent signature required when reintrating)   OATE	8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE    Signature typed or printed raine of registered agent and time is applicable   (NOTE Registered Agent algorator registered agent, or both, in the state of Florida.    FILE NOW:	8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE    Signature typed or printed rame of registered agent and time is applicable   (NOTE responsed Agent algorator registered agent, or both, in the state of Florida.    FILE NOW:   9. Election Campaign Financing   \$5.00 May Be   Make Check Payable to   PEE-IS-\$61:25   Trust Fund Contribution.   Added to Feea   Department of State   Trust Fund Contribution.   Added to Feea   Department of State   Trust Fund Contribution.   Added to Feea   Department of State   Trust Fund Contribution.   Added to Feea   Department of State   Trust Fund Contribution.   Added to Feea   Department of State   Trust Fund Contribution.   Added to Feea   Department of State   Trust Fund Contribution.   Added to Feea   Department of State   Trust Fund Contribution.   Added to Feea   Department of State   Trust Fund Contribution.   Added to Feea   Department of State   Department of State   Trust Fund Contribution.   Added to Feea   Department of State   Department of State   Trust Fund Contribution.   Added to Feea   Department of State   Department of State   Trust Fund Contribution.   Addition   Trust Fund Contribution.   Trust Fund Contribution.   Addition   Trust Fu	8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE    Signature typed or printed rame of registered agent and time is applicable   (NOTE responsed Agent algorator registered agent, or both, in the state of Florida.    FILE NOW:   9. Election Campaign Financing   \$5.00 May Be   Make Check Payable to   PEE-IS-\$61:25   Trust Fund Contribution.   Added to Feea   Department of State   Trust Fund Contribution.   Added to Feea   Department of State   Trust Fund Contribution.   Added to Feea   Department of State   Trust Fund Contribution.   Added to Feea   Department of State   Trust Fund Contribution.   Added to Feea   Department of State   Trust Fund Contribution.   Added to Feea   Department of State   Trust Fund Contribution.   Added to Feea   Department of State   Trust Fund Contribution.   Added to Feea   Department of State   Trust Fund Contribution.   Added to Feea   Department of State   Department of State   Trust Fund Contribution.   Added to Feea   Department of State   Department of State   Trust Fund Contribution.   Added to Feea   Department of State   Department of State   Trust Fund Contribution.   Addition   Trust Fund Contribution.   Trust Fund Contribution.   Addition   Trust Fu	8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE    Signature   Type   Type	8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE    Signature hoped or pristed name of registered agent and the # applicable	8. The above named entity submits this statement for the purpose of changing its registered office of registered agent, or both, in the state of Florida.  SIGNATURE    Signature typed or printed name of registered agent and time is applicable   (NOTE: Registered Agent algorithm required when reintrating)   OATE	8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature. Yound or printed name of registered agent and title if applicable. (NOTE: Registered Agent algorithm required when reinstating)  PILE NOW:  9. Election Campaign Financing Added to Fees.  PEE-IS-\$61:25  OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE  CHATRMANT: FEATURE: WARD, REV. PATRICK J  STREET ADDRESS CITY-ST-2IP  DUNEDIN FL 34698  TITLE  PRESIDENT  Oelete  TITLE  NAME WARNER, JUDITH NAME WARNER, JUDITH STREET ADDRESS CITY-ST-2P  TITLE  OCHAIRMANER, JUDITH NAME WARNER, JUDITH STREET ADDRESS CITY-ST-2P  OUNDEDIN FL 34698  TITLE  OCHAIRMANER DR CITY-ST-2P  TITLE  OCHAIRMANER DR CITY-ST-2P  OUNDEDIN FL 34698  TITLE  OCHAIRMANER DR CITY-ST-2P  OCHAIRMANER DR CITY-ST-2P  OUNDEDIN FL 34698  TITLE  OCHAIRMANER DR CITY-ST-2P  OCHAIRMANER DR CITY-ST		•				<u> </u>	<del></del>	$\dashv$
SIGNATURE  Signature. Typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent atgressure required when reinstating)  FILE NOW:  9. Election Campaign Financing  \$5.00 May Be  Make Check Payable to  FEE-IS-\$61:25  Trust Fund Contribution	Make Check Payable to  Department of State  INS/CHANGES TO OFFICERS AND DIRECTORS IN 10	FILE NOW:    Signature. typod or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating)   DATE	SIGNATURE    Signature, typed or printed name of regressed agent and title if applicable. (NOTE Registered Agent algorature required when reinstating)   DATE	SIGNATURE    Signature typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent applica	SIGNATURE    Signature typed or printed name of registered agent and time if applicable   (NOTE: Registered Agent applicab	SIGNATURE    Signature typed or printed name of registered agent and time if applicable   (NOTE: Registered Agent applicab	SIGNATURE    Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent algorature required when rainstating)   DATE	SIGNATURE    Signature, Vood or printed name of ingressed agent and title if applicable.   (NOTE: Registered Agent applicable.   (NOTE: Registered	SIGNATURE    Signature. Viced or priviled name of registered agent and title # applicable   (NOTE: Registered Agent signature required when reinstating)   DATE	SIGNATURE    Signature Typed or printed name of registered agent and the if applicable   (NOTE Registered Agent algorithm registe	·			City		FL Zip C	Code	
Signature. Typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  FILE NOW:  9. Election Campaign Financing \$5.00 May Be  Trust Fund Contribution. ————————————————————————————————————	Make Check Payable to  Department of State  INS/CHANGES TO OFFICERS AND DIRECTORS IN 10	FILE NOW:  FILE NOW:  9. Election Campaign Financing Trust Fund Contribution.  Added to Fees.  Department of State  Trust Fund Contribution.  CHATRMAN: FEATURE:  WARD, REV. PATRICK J.  SIRET ADDRESS GITY-S1-ZIP  TILE  WARNER, JUDITH  AME WARNER, JUDITH  AME WARNER, JUDITH  G139 EDGEWATER DR  UNEDIN FL 34698  TILE  WARNER, JUDITH  AME WARNER, JUDITH  G39 EDGEWATER DR  UNEDIN FL 34698  TILE  WARNER, JUDITH  G39 EDGEWATER DR  UNEDIN FL 34698  TILE  WARNER, JUDITH  G39 EDGEWATER DR  UNEDIN FL 34698  TILE  WARNER, JUDITH  G39 EDGEWATER DR  UNEDIN FL 34698  TILE  WARNER, JUDITH  G39 EDGEWATER DR  UNEDIN FL 34698  TILE  WARNER, JUDITH  G39 EDGEWATER DR  UNEDIN FL 34698  TILE  WARNER, JUDITH  G39 EDGEWATER DR  UNEDIN FL 34698  TILE  CROOK, THOMAS M.  Delete  TILE  CROOK, THOMAS M.  Addition  CROOK, THOMAS M.	FILE NOW:  9. Election Campaign Financing FEE-16-\$61:25  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE NAME STREET ADDRESS CITY-ST-ZPP  TITLE WARNER, JUDITH MAME WARNER, JUDITH MAME STREET ADDRESS CITY-ST-ZPP  TITLE WARNER, JUDITH MAME WARNER, JUDITH MAME STREET ADDRESS CITY-ST-ZPP  TITLE WARNER, JUDITH STREET ADDRESS CITY-ST-ZPP  STREET ADDRESS	FILE NOW:  9. Election Campaign Financing Trust Eund Contribution.  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE NAME WARD, REV. PATRICK J SIRET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE WARNER, JUDITH STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE WARNER, JUDITH STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE WARNER, JUDITH STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT Delete TITLE STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT Delete TITLE STREET ADDRESS CITY-ST-ZIP  TITLE VICE PRESIDENT Delete TITLE STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  CITY-ST-ZIP DUNEDIN FL 34698  TITLE CHARGE TO OFFICERS AND DIRECTORS IN 10  CHARGE Added to Fees  Added to Fees  DAMAE CHECK Payable to  Added to Fees  DEPARTMENT of State  CHARGES TO OFFICERS AND DIRECTORS IN 10  CHARGES TO OFFICERS AND DIRECTORS IN 1	FILE NOW:  FILE NOW:  9. Election Campaign Financing Trust Eund Contribution.  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE NAME NAME SIRET ADDRESS CITY-ST-ZIP  TITLE  PRESIDENT  Delete TITLE NAME SIRET ADDRESS CITY-ST-ZIP  TITLE  VARNER, JUDITH STREET ADDRESS CITY-ST-ZIP  TITLE  VARNER, JUDITH STREET ADDRESS CITY-ST-ZIP  TITLE  VARNER, JUDITH STREET ADDRESS CITY-ST-ZIP  TITLE  VICE PRESIDENT  Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE  VICE PRESIDENT  Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE  VICE PRESIDENT  Delete TITLE  NAME STREET ADDRESS CITY-ST-ZIP  TITLE  VICE PRESIDENT  Delete TITLE  NAME STREET ADDRESS CITY-ST-ZIP  TITLE  VICE PRESIDENT  Delete TITLE  NAME STREET ADDRESS CITY-ST-ZIP  TITLE  VICE PRESIDENT  Delete TITLE  CROOK, THOMAS M STREET ADDRESS CITY-ST-ZIP  DUNEDIN FL 34698  STREET ADDRESS CITY-ST-ZIP  DUNEDIN FL 34698  STREET ADDRESS CITY-ST-ZIP  DUNEDIN FL 34698	FILE NOW:  FILE NOW:  9. Election Campaign Financing Trust Eund Contribution.  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE NAME NAME SIRET ADDRESS CITY-ST-ZIP  TITLE  PRESIDENT  Delete TITLE NAME SIRET ADDRESS CITY-ST-ZIP  TITLE  VARNER, JUDITH STREET ADDRESS CITY-ST-ZIP  TITLE  VARNER, JUDITH STREET ADDRESS CITY-ST-ZIP  TITLE  VARNER, JUDITH STREET ADDRESS CITY-ST-ZIP  TITLE  VICE PRESIDENT  Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE  VICE PRESIDENT  Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE  VICE PRESIDENT  Delete TITLE  NAME STREET ADDRESS CITY-ST-ZIP  TITLE  VICE PRESIDENT  Delete TITLE  NAME STREET ADDRESS CITY-ST-ZIP  TITLE  VICE PRESIDENT  Delete TITLE  NAME STREET ADDRESS CITY-ST-ZIP  TITLE  VICE PRESIDENT  Delete TITLE  CROOK, THOMAS M STREET ADDRESS CITY-ST-ZIP  DUNEDIN FL 34698  STREET ADDRESS CITY-ST-ZIP  DUNEDIN FL 34698  STREET ADDRESS CITY-ST-ZIP  DUNEDIN FL 34698	FILE NOW:  9. Election Campaign Financing FEE-16-\$61:25  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE NAME STREET ADDRESS CITY-ST-ZPP  TITLE WARNER, JUDITH MAME MAME STREET ADDRESS CITY-ST-ZPP  TITLE MAME MAME STREET ADDRESS STREET	FILE NOW:  9. Election Campaign Financing FFEE-IS-\$61:25  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE WARNER, JUDITH G19 EDEREWATER DR DUNEDIN FL 34698  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE WARNER, JUDITH G19 EDEREWATER DR DUNEDIN FL 34698  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE WARNER, JUDITH G19 EDEREWATER DR DUNEDIN FL 34698  TITLE WARNER, JUDITH G19 EDEREWATER DR DUNEDIN FL 34698  TITLE WARNER, JUDITH G19 EDEREWATER DR DUNEDIN FL 34698  TITLE WARNER, JUDITH G19 EDEREWATER DR CITY-ST-ZIP  TITLE WARNER, JUDITH G19 EDEREWATER DR CITY-ST-ZIP  TITLE WARNER, JUDITH G19 EDEREWATER DR CITY-ST-ZIP  TITLE VICE PRESIDENT DUNEDIN FL 34698  TITLE STREET ADDRESS G19 EDERWATER DR CITY-ST-ZIP  TITLE VICE PRESIDENT DUNEDIN FL 34698  TITLE STREET ADDRESS G19 EDERWATER DR CHANGE STREET ADDRESS STR	FILE NOW:  FILE NOW:  9. Election Campaign Financing Trust Fund Contribution.  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE WARD, REV. PATRICK J SIRET ADDRESS CITY-S1-ZIP DUNEDIN FL 34698  TITLE WARNER, JUDITH 639 EDGEWATER DR STREET ADDRESS CITY-S1-ZIP DUNEDIN FL 34698  TITLE WARNER, JUDITH 639 EDGEWATER DR DUNEDIN FL 34698  TITLE WARNER, JUDITH 639 EDGEWATER DR DUNEDIN FL 34698  TITLE WARNER, JUDITH 639 EDGEWATER DR DUNEDIN FL 34698  TITLE WARNER, JUDITH 639 EDGEWATER DR DUNEDIN FL 34698  TITLE WARNER, JUDITH 639 EDGEWATER DR DUNEDIN FL 34698  TITLE WARNER, JUDITH 639 EDGEWATER DR DUNEDIN FL 34698  TITLE WARNER, JUDITH 639 EDGEWATER DR DUNEDIN FL 34698  TITLE WICE PRESIDENT Delete  TITLE WICE PRESIDENT Delete  TITLE WICE PRESIDENT Delete	FILE NOW:  9. Election Campaign Financing Trust Fund Contribution.  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE NAME WARD, REV. PATRICK J STREET ADDRESS CITY-S1-ZIP DUNED IN FL. 34698  TITLE STREET ADDRESS CITY-S1-ZIP DUNED IN FL. 34698  TITLE VICE PRESIDENT  Delete DATE  9. Election Campaign Financing Trust Fund Contribution.  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE WARD, REV. PATRICK J STREET ADDRESS CITY-S1-ZIP DUNED IN FL. 34698  TITLE STREET ADDRESS CITY-S1-ZIP DUNED IN FL. 34698  TITLE  VICE PRESIDENT  Delete TITLE  Change Addition  OFFICERS AND DIRECTORS IN 10  O	8. The abov	re named entity submits this statement for	r the purpose of changing its re	egistered office or regis	tered agent, or both, in the state of Flo	orida.		
FILE NOW:  9. Election Campaign Financing \$5.00 May Be  Make Check Payable to  Trust Fund Contribution Added to Fees Department of State	Make Check Payable to  Department of State  INS/CHANGES TO OFFICERS AND DIRECTORS IN 10	FILE NOW:  FEE-IS \$61.25  Department of State  Trust Fund Contribution.  The president Dunedin FL 34698  FILE NOW:  FEE-IS \$61.25  Trust Fund Contribution.  Added to Fees  Department of State  Trust Fund Contribution.  Added to Fees  Department of State  Trust Fund Contribution.  Added to Fees  Department of State  Trust Fund Contribution.  Addition State  Addition State  Addition Street Addition  Trust Fund Contribution.  Addition Street Addition  Addition Street Addition  Trust Fund Contribution.  Addition State  Addition Street Addition  Trust Fund Contribution.  Addition State  Addition Street Addition  Trust Fund Contribution.  Addition Street Addition  Addition Street Addition  Trust Fund Contribution.  Addition Street Addition Street Addition  Addition Street Addition  Trust Fund Contribution.  Addition Street Addition Stre	FILE NOW:  FEE-IS-\$61:25  Trust Fund Contribution.  Trust Fund Contrib	FILE NOW:  FEE-IS-\$61:25  Jivest Fund Contribution.  10.  OFFICERS AND DIRECTORS  11.  Added to Fees  Department of State  11.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  CHATRMAN:  LEAT LIC:  WARD, REV. PATRICK J.  STREET ADDRESS  CITY-SI-ZIP  DUNED IN FL. 34698  TITLE  WARNER, JUDITH  WARNER, JUDITH  639 EDGEWATER DR  DUNED IN FL. 34698  TITLE  WARNER, JUDITH  639 EDGEWATER DR  DUNED IN FL. 34698  TITLE  VICE PRESIDENT  Delete  TITLE  CROOK, THOMAS M.  639 EDGEWATER DR  DUNED IN FL. 34698  TITLE  CROOK, THOMAS M.  639 EDGEWATER DR  DUNED IN FL. 34698  CITY-SI-ZIP  CROOK, THOMAS M.  639 EDGEWATER DR  SIREET ADDRESS  CITY-SI-ZIP  DUNED IN FL. 34698  CITY-SI-ZIP  CROOK, THOMAS M.  639 EDGEWATER DR  SIREET ADDRESS  CITY-SI-ZIP  DUNED IN FL. 34698  CITY-SI-ZIP  CROOK, THOMAS M.  639 EDGEWATER DR  SIREET ADDRESS  CITY-SI-ZIP  CITY-SI-ZIP  CITY-SI-ZIP	FILE NOW:  FEE-IS-\$61:25  Jirust Fund Contribution.  10.  OFFICERS AND DIRECTORS  11.  Added to Fees  Department of State  11.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  CHATRMAN:  LEAT LIC:  WARD, REV. PATRICK J.  SIREIT ADDRESS  CITY-SI-ZIP  DUNED IN FL. 34698  TITLE  WARNER, JUDITH  WARNER, JUDITH  639 EDGEWATER DR  DUNED IN FL. 34698  TITLE  WARNER, JUDITH  SIREIT ADDRESS  CITY-SI-ZIP  DUNED IN FL. 34698  TITLE  VICE PRESIDENT  JORIES  CITY-SI-ZIP  TITLE  CROOK, THOMAS M.  639 EDGEWATER DR  DUNED IN FL. 34698  TITLE  CROOK, THOMAS M.  639 EDGEWATER DR  DUNED IN FL. 34698  CITY-SI-ZIP  CROOK, THOMAS M.  639 EDGEWATER DR  SIREIT ADDRESS  CITY-SI-ZIP  DUNED IN FL. 34698  CITY-SI-ZIP  CITY-SI-ZIP  CITY-SI-ZIP  CITY-SI-ZIP  CITY-SI-ZIP  CITY-SI-ZIP	FILE NOW:  FEE-IS-\$61:25  Jirust Fund Contribution.  10.  OFFICERS AND DIRECTORS  11.  Added to Fees  Department of State  11.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  CHATRMAN:  LEAT LIC:  WARD, REV. PATRICK J.  SIREIT ADDRESS  CITY-SI-ZIP  DUNED IN FL. 34698  TITLE  WARNER, JUDITH  WARNER, JUDITH  639 EDGEWATER DR  DUNED IN FL. 34698  TITLE  WARNER, JUDITH  SIREIT ADDRESS  CITY-SI-ZIP  DUNED IN FL. 34698  TITLE  VICE PRESIDENT  JORIES  CITY-SI-ZIP  TITLE  CROOK, THOMAS M.  639 EDGEWATER DR  DUNED IN FL. 34698  TITLE  CROOK, THOMAS M.  639 EDGEWATER DR  DUNED IN FL. 34698  CITY-SI-ZIP  CROOK, THOMAS M.  639 EDGEWATER DR  SIREIT ADDRESS  CITY-SI-ZIP  DUNED IN FL. 34698  CITY-SI-ZIP  CITY-SI-ZIP  CITY-SI-ZIP  CITY-SI-ZIP  CITY-SI-ZIP  CITY-SI-ZIP	FILE NOW:  FEE-IS-\$61:26  Trust Fund Contribution.  Trust Fund Contribution.  Trust Fund Contribution.  Added to Fees  Department of State  10.  OFFICERS AND DIRECTORS  11.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE WARD, REV. PATRICK J.  STREET ADDRESS CITY-ST-ZIP  DUNEDIN FL 34698  TITLE WARNER, JUDITH NAME STREET ADDRESS CITY-ST-ZIP  TITLE WARNER, JUDITH STREET ADDRESS CITY-ST-ZIP  TITLE STREET ADDRE	FILE NOW:  FEE IS \$61:26  Trust Fund Contribution.  Trust Fund Contribution.  Trust Fund Contribution.  Added to Fees  Department of State  10.  OFFICERS AND DIRECTORS  11.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  CHAIRMAN:  CHAIRM	FILE NOW:  9. Election Campaign Financing Trust Fund Contribution.  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  I'ILE WARD, REV. PATRICK WARD, REV. PATRICK J SIREFI ADDRESS CITY-ST-ZIP UNDED IN FL 34698  TILE WARNER, JUDITH STREET ADDRESS CITY-ST-ZIP WARNER, JUDITH STREET ADDRESS CITY-ST-ZIP UNDED IN FL 34698  TILE WARNER, JUDITH STREET ADDRESS CITY-ST-ZIP UNDED IN FL 34698  TILE VICE PRESIDENT Delete TILE CROOK, THOMAS M.  Ochange Addition  Change Addition  Change Addition  Change Addition  Change Addition  Change Addition	FILE NOW:  FEE-IS-\$61:25  9. Election Campaign Financing Trust Fund Contribution.  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  ITILE WARD, REV. PATRICK J SIREET ADDRESS CITY-S1-ZIP  TITLE PRESIDENT  Delete TITLE NAME WARNER, JUDITH SIREET ADDRESS CITY-S1-ZIP  WARNER, JUDITH SIREET ADDRESS CITY-S1-ZIP DUNEDIN FL 34698  ITILE  Change Addition  Octange Addition	SIGNATURE	·		_				
FEE-IS-\$61.25 Trust Fund Contribution Added to Fees Department of State	Department of State  INS/CHANGES TO OFFICERS AND DIRECTORS IN 10	Trust Fund Contribution. Added to Fees Department of State    Contribution   Added to Fees   Department of State	Trust Fund Contribution. Added to Fees Department of State  10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE CHAIRMAN FEATURE. Delete TITLE WARD, REV. PATRICK J. STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE PRESIDENT Delete TITLE CHANGE Addition STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE WARNER, JUDITH STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT Delete TITLE CHANGE Addition CROOK, THOMAS M. STREET ADDRESS CITY-ST-ZIP  TITLE VICE PRESIDENT Delete TITLE CROOK, THOMAS M. STREET ADDRESS CITY-ST-ZIP  TITLE VICE PRESIDENT Delete TITLE CROOK, THOMAS M. STREET ADDRESS CITY-ST-ZIP  TITLE VICE PRESIDENT Delete TITLE CROOK, THOMAS M. STREET ADDRESS CITY-ST-ZIP  TITLE VICE PRESIDENT Delete STREET ADDRESS STREET ADDRESS CITY-ST-ZIP  TITLE VICE PRESIDENT STREET ADDRESS CITY-ST-ZIP  TITLE VICE PRESIDENT STREET ADDRESS S	Trust Fund Contribution. Added to Fees Department of State  10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE CHATRMAN FEATURE Delete TITLE WARD, REV. PATRICK J NAME STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TRUST ADDRESS CITY-ST-ZIP  TITLE WARNER, JUDITH NAME STREET ADDRESS CITY-ST-ZIP  TITLE VICE PRESIDENT Delete TITLE  CROOK, THOMAS M, STREET ADDRESS CITY-ST-ZIP  TITLE VICE PRESIDENT Delete TITLE  CROOK, THOMAS M, STREET ADDRESS CITY-ST-ZIP  TITLE VICE PRESIDENT Delete TITLE  CROOK, THOMAS M, STREET ADDRESS CITY-ST-ZIP  DUNEDIN FL 34698  TRUST FUND CONTROL OF STREET ADDRESS CITY-ST-ZIP  TITLE VICE PRESIDENT Delete TITLE  CROOK, THOMAS M, STREET ADDRESS CITY-ST-ZIP  DUNEDIN FL 34698  TRUST FUND CONTROL OF STREET ADDRESS CITY-ST-ZIP  TOTAL OFFICERS AND DIRECTORS IN 10  Added to Fees Department of State  Added to Fees Department of State  TITLE NAME  STREET ADDRESS CITY-ST-ZIP  TOTAL OFFICERS AND DIRECTORS IN 10  Addition Additio	Trust Fund Contribution. Added to Fees Department of State  10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  ITTLE CHAIRMAN FEATURE Delete TITLE WARD, REV. PATRICK J STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  CITY-ST-ZIP DUNEDIN FL 34698  ITTLE WARNER, JUDITH STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT Delete TITLE STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  CITY-ST-ZIP DUNEDIN FL 34698  TREET ADDRESS CITY-ST-ZIP DELETE TITLE STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  CITY-ST-ZIP DUNEDIN FL 34698  CITY-ST-ZIP DUNEDIN FL 34698  TREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  CITY-ST-ZIP DUNEDIN FL 34698  CITY-ST-ZIP DUNEDIN FL 34698  TREET ADDRESS CITY-ST-ZIP  CROOK, THOMAS M, STREET ADDRESS CITY-ST-ZIP  CITY-ST-ZIP DUNEDIN FL 34698	Trust Fund Contribution. Added to Fees Department of State  10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  ITTLE CHAIRMAN FEATURE Delete TITLE WARD, REV. PATRICK J STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  CITY-ST-ZIP DUNEDIN FL 34698  ITTLE WARNER, JUDITH STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT Delete TITLE STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  CITY-ST-ZIP DUNEDIN FL 34698  TREET ADDRESS CITY-ST-ZIP DELETE TITLE STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  CITY-ST-ZIP DUNEDIN FL 34698  CITY-ST-ZIP DUNEDIN FL 34698  TREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  CITY-ST-ZIP DUNEDIN FL 34698  CITY-ST-ZIP DUNEDIN FL 34698  TREET ADDRESS CITY-ST-ZIP  CROOK, THOMAS M, STREET ADDRESS CITY-ST-ZIP  CITY-ST-ZIP DUNEDIN FL 34698	Trust Fund Contribution. Added to Fees Department of State  10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE CHAIRMAN FEATURE DATE DELETED DELE	Trust Fund Contribution. Added to Fees Department of State  10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE CHAIRMAN FEATURE DR CITY-ST-ZIP  WARD, REV. PATRICK J NAME STREET ADDRESS CITY-ST-ZIP  DUNEDIN FL 34698  TITLE PRESIDENT Delete TITLE  WARNER, JUDITH STREET ADDRESS CITY-ST-ZIP  TITLE WARNER, JUDITH STREET ADDRESS CITY-ST-ZIP  TITLE VICE PRESIDENT Delete TITLE  CHAIRMAN FAME STREET ADDRESS CITY-ST-ZIP  TITLE VICE PRESIDENT Delete TITLE  CROOK, THOMAS M, STREET ADDRESS	Trust Fund Contribution Added to Fees Department of State  10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE CHAIRMAN TEXATIC Delete TITLE CHAIRMAN TEXATIC STREET ADDRESS CITY-SI-ZIP DUNEDIN FL 34698  TITLE PRESIDENT Delete TITLE CHANGE ADDRESS CITY-SI-ZIP CHANGE STREET ADDRESS CITY-SI-ZIP CITY-SI-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT Delete TITLE CHANGE ADDRESS CITY-SI-ZIP CITY-SI-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT Delete TITLE CITY-SI-ZIP CITY-SI-ZIP CITY-SI-ZIP CITY-SI-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT Delete TITLE CITY-SI-ZIP CITY-SI-ZIP CITY-SI-ZIP CITY-SI-ZIP CROOK, THOMAS M. MAME	Trust Fund Contribution Added to Fees Department of State  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE CHATRMAN: FEATURE Delete TITLE WARD, REV. PATRICK J NAME STREET ADDRESS GITY-ST-ZIP DUNEDIN FL 34698  TITLE PRESIDENT Delete TITLE Change Addition  WARNER, JUDITH STREET ADDRESS GITY-ST-ZIP DUNEDIN FL 34698  TITLE WARNER, JUDITH STREET ADDRESS GITY-ST-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT Delete TITLE Change Addition  Change Addition  Change Addition		Signature, typed or printed name of registered agent	and the it applicable. (NOTE: F	Registered Agent signature requ	ired when reinstating)	CATE		4
10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		THE CHAIRMANI TERATIC: Delete THE WARD, REV. PATRICK J.  AME THEFT ADDRESS TITY-ST-ZIP  DUNEDIN FL 34698  THE PRESIDENT  WARNER, JUDITH  639 EDGEWATER DR THREET ADDRESS THY-ST-ZIP  WARNER, JUDITH  639 EDGEWATER DR DUNEDIN FL 34698  THE VICE PRESIDENT  Delete  THLE  Change Addition	TITLE WARD, REV. PATRICK J.  STREET ADDRESS CITY-ST-ZIP  TITLE  WARD, REV. PATRICK J.  STREET ADDRESS CITY-ST-ZIP  TITLE  WARD, REV. PATRICK J.  STREET ADDRESS CITY-ST-ZIP  TITLE  PRESIDENT  Delete  TITLE  NAME  STREET ADDRESS CITY-ST-ZIP  TITLE  Change  Addition	TITLE WARD, REV. PATRICK J.  STREET ADDRESS CITY-ST-ZIP  WARD, REV. PATRICK J.  STREET ADDRESS CITY-ST-ZIP  WARD, REV. PATRICK J.  STREET ADDRESS CITY-ST-ZIP  Delete  TITLE  NAME STREET ADDRESS CITY-ST-ZIP  DELETE  TITLE  Change  Addition	TITLE WARD, REV. PATRICK J.  STREET ADDRESS CITY-ST-ZIP  MAME  STREET ADDRESS CITY-ST-ZIP  CHATRMAN TEXATIC Delete  TITLE  WARD, REV. PATRICK J.  STREET ADDRESS CITY-ST-ZIP  DUNEDIN FL 34698  TITLE  NAME  STREET ADDRESS CITY-ST-ZIP  DUNEDIN FL 34698  TITLE  Change Addition	TITLE WARD, REV. PATRICK J.  STREET ADDRESS CITY-ST-ZIP  MAME  STREET ADDRESS CITY-ST-ZIP  CHATRMAN TEXATIC Delete  TITLE  WARD, REV. PATRICK J.  STREET ADDRESS CITY-ST-ZIP  DUNEDIN FL 34698  TITLE  NAME  STREET ADDRESS CITY-ST-ZIP  DUNEDIN FL 34698  TITLE  Change Addition	TITLE CHAIRMAN TEXATIC Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE PRESIDENT Delete TITLE WARD, REV. PATRICK J STREET ADDRESS CITY-SI-ZIP  TITLE WARNER, JUDITH STREET ADDRESS CITY-SI-ZIP  TITLE VICE PRESIDENT Delete TITLE NAME STREET ADDRESS CITY-SI-ZIP  TITLE VICE PRESIDENT Delete TITLE  CHAIRMAN TEXATIC Delete TITLE  Change Addition  STREET ADDRESS CITY-SI-ZIP  TITLE VICE PRESIDENT Delete TITLE  CROOK, THOMAS M. STREET ADDRESS G39 EDGEWATER DR  STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	TITLE CHAIRMAN: TEXATIC: Delete WARD, REV. PATRICK J. STREET ADDRESS CITY-SI-ZIP DUNEDIN FL 34698  TITLE PRESIDENT Delete TILE Change Addition STREET ADDRESS CITY-SI-ZIP  MAME STREET ADDRESS CITY-SI-ZIP  TITLE VICE PRESIDENT Delete TILE  WARNER, JUDITH STREET ADDRESS CITY-SI-ZIP  TITLE VICE PRESIDENT Delete TILE  NAME STREET ADDRESS CITY-SI-ZIP  TITLE VICE PRESIDENT Delete TILE  NAME STREET ADDRESS CITY-SI-ZIP  TITLE VICE PRESIDENT Delete TILE  CROOK, THOMAS M. STREET ADDRESS  STREET ADDRESS  639 EDGEWATER DR STREET ADDRESS	TITLE CHAIRMAN TEXATIC Delete TITLE NAME STREET ADDRESS CITY-SI-ZIP DUNEDIN FL 34698  TITLE PRESIDENT Delete TITLE Change Addition  WARD, REV. PATRICK J.  STREET ADDRESS CITY-SI-ZIP  TITLE PRESIDENT Delete TITLE  WARNER, JUDITH  STREET ADDRESS CITY-SI-ZIP  TITLE VICE PRESIDENT Delete TITLE  NAME  STREET ADDRESS CITY-SI-ZIP  TITLE VICE PRESIDENT Delete TITLE  Change Addition  Change Addition  Change Addition  Change Addition  Change Addition	TITLE CHAIRMAN TEXATIC Delete WARD, REV. PATRICK J. STREET ADDRESS CITY-SI-ZIP DUNEDIN FL 34698  TITLE PRESIDENT Delete TILE Change Addition STREET ADDRESS CITY-SI-ZIP CITY-SI-ZIP  WARDER, JUDITH STREET ADDRESS CITY-SI-ZIP  TITLE VICE PRESIDENT Delete TILE Change Addition STREET ADDRESS CITY-SI-ZIP  TITLE VICE PRESIDENT Delete TILE Change Addition STREET ADDRESS CITY-SI-ZIP  TITLE VICE PRESIDENT Delete TILE Change Addition								>=\\
	Change	AME TREET ADDRESS ITY-SI-ZIP TILE  VICE PRESIDENT  CROOK, THOMAS M.  AME  NAME STREET ADDRESS CITY-SI-ZIP TILE  CROOK, THOMAS M.  NAME  NAME  NAME STREET ADDRESS CITY-SI-ZIP TILE  CROOK, THOMAS M.  NAME  NAME  NAME  NAME  NAME  NAME  STREET ADDRESS CITY-SI-ZIP TILE  CROOK, THOMAS M.	MAME STREET ADDRESS CITY-SI-ZIP  DUNEDIN FL 34698  TITLE  VICE PRESIDENT  CROOK, THOMAS M, STREET ADDRESS CITY-SI-ZIP  Delete  TITLE  CROOK, THOMAS M, STREET ADDRESS CITY-SI-ZIP  CROOK, THOMAS M, STREET ADDRESS CITY-SI-ZIP  STREET ADDRESS CITY-SI-ZIP  TITLE  CROOK, THOMAS M, STREET ADDRESS STREET ADDRESS	NAME STREET ADDRESS CITY-ST-7NP DUNEDIN FL 34698  ITTLE VICE PRESIDENT CROOK, THOMAS M, STREET ADDRESS CITY-ST-2NP DUNEDIN FL 34698  ITTLE CROOK, THOMAS M, STREET ADDRESS CITY-ST-2NP DUNEDIN FL 34698  NAME STREET ADDRESS CITY-ST-2NP C	WARNER, JUDITH 639 EDGEWATER DR DUNEDIN FL 34698  ITTLE VICE PRESIDENT CROOK, THOMAS M, SIRET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DUNEDIN FL 34698  NAME SIRET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DUNEDIN FL 34698  NAME SIRET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP	WARNER, JUDITH  639 EDGEWATER DR DUNEDIN FL 34698  ITTLE  VICE PRESIDENT  CROOK, THOMAS M, SIRET ADDRESS CITY-ST-ZIP  CITY-ST-ZIP  DUNEDIN FL 34698  NAME  STREET ADDRESS CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  NAME  STREET ADDRESS CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP	NAME STREET ADDRESS CITY-ST-ZIP  DUNEDIN FL 34698  TITLE  VICE PRESIDENT  CROOK, THOMAS M, STREET ADDRESS CITY-ST-ZIP  Delete  TITLE  CROOK, THOMAS M, STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	WARNER, JUDITH  STREET ADDRESS CITY-SI-ZIP  DUNEDIN FL 34698  TITLE  VICE PRESIDENT  CROOK, THOMAS M,  STREET ADDRESS CITY-SI-ZIP  TITLE  VICE PRESIDENT  CROOK, THOMAS M,  STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	NAME STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT CROOK, THOMAS M, NAME  NAME  NAME  NAME  NAME STREET ADDRESS CITY-S1-ZIP  NAME	WARNER, JUDITH STREET ADDRESS CITY-S1-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT Delete  NAME STREET ADDRESS CITY-S1-ZIP  TITLE  Change Addition	10.	OFFICERS AND DIF	RECTORS	11.	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS	IN 10	╛_
CHAILMIN' (LDMIGHTO)	2E037	AME TREET ADDRESS ITY-SI-ZIP TILE  VICE PRESIDENT  CROOK, THOMAS M,  AME  NAME  STREET ADDRESS CITY-SI-ZIP  Delete  TITLE  NAME  STREET ADDRESS CITY-SI-ZIP  TITLE  CROOK, THOMAS M,  NAME  NAME	MAME STREET ADDRESS CITY-SI-ZIP  DUNEDIN FL 34698  TITLE  VICE PRESIDENT  CROOK, THOMAS M, STREET ADDRESS CITY-SI-ZIP  Delete  TITLE  CROOK, THOMAS M, STREET ADDRESS CITY-SI-ZIP  CROOK, THOMAS M, STREET ADDRESS CITY-SI-ZIP  STREET ADDRESS CITY-SI-ZIP  TITLE  CROOK, THOMAS M, STREET ADDRESS STREET ADDRESS	MAME STREET ADDRESS CITY-ST-7NP DUNEDIN FL 34698  ITTLE VICE PRESIDENT CROOK, THOMAS M, STREET ADDRESS CITY-ST-2NP DUNEDIN FL 34698  ITTLE CROOK, THOMAS M, STREET ADDRESS CITY-ST-2NP DUNEDIN FL 34698  NAME STREET ADDRESS CITY-ST-2NP CITY-ST-2NP CITY-ST-2NP CITY-ST-2NP  NAME STREET ADDRESS CITY-ST-2NP CITY-ST-2NP  NAME STREET ADDRESS CITY-ST-2NP	WARNER, JUDITH  639 EDGEWATER DR DUNEDIN FL 34698  ITTLE  VICE PRESIDENT  CROOK, THOMAS M, SIRET ADDRESS CITY-ST-ZIP  CITY-ST-ZIP  DUNEDIN FL 34698  NAME  STREET ADDRESS CITY-ST-ZIP  CTY-ST-ZIP  DUNEDIN FL 34698  NAME  STREET ADDRESS CITY-ST-ZIP  CTY-ST-ZIP  CTY-ST-ZIP	WARNER, JUDITH  639 EDGEWATER DR DUNEDIN FL 34698  ITTLE  VICE PRESIDENT  CROOK, THOMAS M, SIRET ADDRESS CITY-ST-ZIP  CITY-ST-ZIP  DUNEDIN FL 34698  NAME  STREET ADDRESS CITY-ST-ZIP  CTY-ST-ZIP  DUNEDIN FL 34698  NAME  STREET ADDRESS CITY-ST-ZIP  CTY-ST-ZIP  CTY-ST-ZIP	NAME STREET ADDRESS CITY-ST-ZIP  DUNEDIN FL 34698  TITLE  VICE PRESIDENT  CROOK, THOMAS M, STREET ADDRESS CITY-ST-ZIP  Delete  TITLE  CROOK, THOMAS M, STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	WARNER, JUDITH  STREET ADDRESS CITY-SI-ZIP  DUNEDIN FL 34698  ITILE  VICE PRESIDENT  CROOK, THOMAS M,  STREET ADDRESS CITY-SI-ZIP  ITILE  CROOK, THOMAS M,  STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	NAME STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT CROOK, THOMAS M.	WARNER, JUDITH STREET ADDRESS CITY-SI-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT Delete  NAME STREET ADDRESS CITY-SI-ZIP  DELET  NAME STREET ADDRESS CITY-SI-ZIP  TITLE  Change Addition				TITLE		Chang	e Addition	, 0/2
STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP		AME TREET ADDRESS ITY-SI-ZIP TILE  VICE PRESIDENT  CROOK, THOMAS M.  AME  NAME STREET ADDRESS CITY-SI-ZIP TILE  CROOK, THOMAS M.  NAME  NAME  NAME STREET ADDRESS CITY-SI-ZIP TILE  CROOK, THOMAS M.  NAME  NAME  NAME  NAME  NAME  NAME  STREET ADDRESS CITY-SI-ZIP TILE  CROOK, THOMAS M.	MAME STREET ADDRESS CITY-SI-ZIP  DUNEDIN FL 34698  TITLE  VICE PRESIDENT  CROOK, THOMAS M, STREET ADDRESS CITY-SI-ZIP  Delete  TITLE  CROOK, THOMAS M, STREET ADDRESS CITY-SI-ZIP  CROOK, THOMAS M, STREET ADDRESS CITY-SI-ZIP  STREET ADDRESS CITY-SI-ZIP  TITLE  CROOK, THOMAS M, STREET ADDRESS STREET ADDRESS	NAME STREET ADDRESS CITY-ST-7NP DUNEDIN FL 34698  ITTLE VICE PRESIDENT CROOK, THOMAS M, STREET ADDRESS CITY-ST-2NP DUNEDIN FL 34698  ITTLE CROOK, THOMAS M, STREET ADDRESS CITY-ST-2NP DUNEDIN FL 34698  NAME STREET ADDRESS CITY-ST-2NP C	WARNER, JUDITH  639 EDGEWATER DR DUNEDIN FL 34698  ITTLE  VICE PRESIDENT  CROOK, THOMAS M, SIRET ADDRESS CITY-ST-ZIP  CITY-ST-ZIP  DUNEDIN FL 34698  NAME  STREET ADDRESS CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  NAME  STREET ADDRESS CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP	WARNER, JUDITH  639 EDGEWATER DR DUNEDIN FL 34698  ITTLE  VICE PRESIDENT  CROOK, THOMAS M, SIRET ADDRESS CITY-ST-ZIP  CITY-ST-ZIP  DUNEDIN FL 34698  NAME  STREET ADDRESS CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  NAME  STREET ADDRESS CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP	NAME STREET ADDRESS CITY-ST-ZIP  DUNEDIN FL 34698  TITLE  VICE PRESIDENT  CROOK, THOMAS M, STREET ADDRESS CITY-ST-ZIP  Delete  TITLE  CROOK, THOMAS M, STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	WARNER, JUDITH  STREET ADDRESS CITY-SI-ZIP  DUNEDIN FL 34698  TITLE  VICE PRESIDENT  CROOK, THOMAS M,  STREET ADDRESS CITY-SI-ZIP  TITLE  VICE PRESIDENT  CROOK, THOMAS M,  STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	NAME STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT CROOK, THOMAS M, NAME  NAME  NAME  NAME  NAME STREET ADDRESS CITY-S1-ZIP  NAME	WARNER, JUDITH STREET ADDRESS CITY-S1-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT Delete  NAME STREET ADDRESS CITY-S1-ZIP  TITLE  Change Addition	STREET ADDRESS		J	NAME			_	JΞ
NAME AND ADDRESS OF THE PARTY O	☐ Change ☐ Addition ☐ S	TREET ADDRESS   639 EDGEWATER DR   STREET ADDRESS   ITY-SI-ZIP   DUNEDIN FL 34698   CITY-SI-ZIP   TILE   VICE PRESIDENT   Delete   TILE   Change   Addition   AME   CROOK, THOMAS M;	STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT Delete NAME CROOK, THOMAS M, STREET ADDRESS 639 EDGEWATER DR STREET ADDRESS 639 EDGEWATER DR STREET ADDRESS STREET ADDRESS	STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT Delete NAME CROOK, THOMAS M, STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  STREET ADDRESS CITY-ST-ZIP CHANGE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP  STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT Delete NAME CROOK, THOMAS M, STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP  STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT Delete NAME CROOK, THOMAS M, STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP  STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT Delete NAME CROOK, THOMAS M, STREET ADDRESS 639 EDGEWATER DR STREET ADDRESS 639 EDGEWATER DR STREET ADDRESS	STREET ADDRESS  CITY-ST-74P  DUNEDIN FL 34698  TITLE  VICE PRESIDENT  CROOK, THOMAS M,  STREET ADDRESS  CITY-ST-74P  TITLE  CROOK, THOMAS M,  STREET ADDRESS	STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT Delete Thank CROOK, THOMAS M; STREET ADDRESS CITY-ST-ZIP TITLE VICE PRESIDENT Delete Thank NAME	STREET ADDRESS CITY-ST-74P DUNEDIN FL 34698 STREET ADDRESS CITY-ST-74P VICE PRESIDENT Delete MILE Change Addition	CITY-ST-ZIP	639 EDGEWATER DR	7	STREET ADDRESS				2E037 (1
STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP		CROOK, THOMAS M,	NAME CROOK, THOMAS M, SIREET ADDRESS 639 EDGEWATER DR STREET ADDRESS	NAME CROOK, THOMAS M, SIRET ADDRESS CITY-SI-ZIP DUNED IN FL 34698  MAME SIRET ADDRESS CITY-SI-ZIP  CITY-SI-ZIP	NAME CROOK, THOMAS M, SIREET ADDRESS CITY-ST-ZIP DUNED IN FL 34698  NAME SIREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	NAME CROOK, THOMAS M, SIREET ADDRESS CITY-ST-ZIP DUNED IN FL 34698  NAME SIREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	NAME CROOK, THOMAS M, SIREET ADDRESS STREET ADDRESS	NAME CROOK, THOMAS M, STREET ADDRESS 639 EDGEWATER DR STREET ADDRESS	NAME CROOK, THOMAS M,		TITLE NAME	639 EDGEWATER DR DUNEDIN FL 34698  PRESIDENT 7 WARNER, JUDITH	7	STREET ADDRESS CITY-ST-ZIP TITLE		Chang	ye □ Addition	CR2E037 (1
CROOK, THOMAS M,	☐ Change ☐ Addition		039 EDGEWATER DR	CITY-SI-ZIP DUNEDIN FL 34698 CITY-SI-ZIP	CITY-ST-ZIP DUNEDIN FL 34698 CITY-ST-ZIP	CITY-ST-ZIP DUNEDIN FL 34698 CITY-ST-ZIP	OJY EDGEWATER DR	UJ9 EDGEWATER DR	STREET ADDRESS 1 4 2 O TED CHETTA MYCH TOD		TITLE NAME STREET ADDRESS	639 EDGEWATER DR DUNEDIN FL 34698  PRESIDENT 7  WARNER, JUDITH  639 EDGEWATER DR DUNEDIN FL 34698	7	STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		Chang	)e □ Addition	CR2E037 (1
CITY-SI-ZIP DUNEDIN FL 34698 CITY-SI-ZIP	- <b> </b> '	TY-ST-ZIP DUNEDIN FL 34698 CIY-ST-ZIP	<del>▗▗▗▝▗▗▗</del> ▝▗▗▗▝▘▃▗▘▀▗▗▗▀▗▗▗▀▗▗▗▗▗▗▗▗▗▗▗▗▗▗▗▗▗▗▗▗▗▗	TOTAL TOPACIONO Change Addition	TITLE TORACTIONS Change Addition	THE PACIFIED	<del>▗▗▄▝▗▘▗▗▝▐▄</del> ▄▗▘▘▗▄▄▀▗▗▗▀▀▄▗▘▞▗▗▄▀▔▗▗▄▄▄▗▄▄▗▄▗▄▗▄▗▄▗▄▗▗▄▗▗▄▗▗▗▄▗▀▗▄▗▀▗	DUNEDIN FE 34070	CITY-ST-ZIP DUNEDIN FL 34698 CITY-ST-ZIP	OJY EDGEWATER DR	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	639 EDGEWATER DR DUNEDIN FL 34698  PRESIDENT WARNER, JUDITH 639 EDGEWATER DR DUNEDIN FL 34698  VICE PRESIDENT CROOK, THOMAS M,	Delote	STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME				
, — · ·				NAME BLACKBURN GLORIA R NAME	NAME BLACKBURN GLORIA R NAME	NAME BLACKBURN GLORIA R NAME			TITLE TO FACILITIES THE TITLE TO THE TITLE TO THE TOTAL TOTA		NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	639 EDGEWATER DR DUNEDIN FL 34698  PRESIDENT WARNER, JUDITH 639 EDGEWATER DR DUNEDIN FL 34698  VICE PRESIDENT CROOK, THOMAS M, 639 EDGEWATER DR DUNEDIN FL 34698	Delote	STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		☐ Chang	e Addition	
	☐ Change ☐ Addition	AME BLACKBURN GLORIA R NAME		STREET ADDRESS   COO DESCRIPTION FOR THE STREET ADDRESS	STREET ADDRESS   630 F.D.C.F.W.A.T.E.R. D.R. STREET ADDRESS	STREET ADDRESS   620 PTO PULLATED TOD STREET ADDRESS			NAME BLACKBURN GLORIA R NAME	NAME BLACKBURN GLORIA R NAME	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	639 EDGEWATER DR DUNEDIN FL 34698  PRESIDENT WARNER, JUDITH 639 EDGEWATER DR DUNEDIN FL 34698  VICE PRESIDENT CROOK, THOMAS M, 639 EDGEWATER DR DUNEDIN FL 34698  TREASURER BLACKBURN GLORIA R	Delete	STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME		☐ Chang	e Addition	
STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP		AME BLACKBURN GLORIA R NAME  TREET ADDRESS  17-ST-ZIP DUNEDIN FL 34698  NAME  STREET ADDRESS  CITY-ST-ZIP  CITY-ST-ZIP	STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	CITY-ST-ZIP DUNEDIN FL 34698 CITY-ST-ZIP	CITY-ST-ZIP DUNEDIN FL 34698 CITY-ST-ZIP	CITY-ST-ZIP DUNEDIN FL 34698 CITY-ST-ZIP	STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	NAME STREET ADDRESS CITY-ST-ZIP DILINEDIN FL 34698  NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	NAME STREET ADDRESS CITY-ST-ZIP DILINEDIN FL 34698  NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	639 EDGEWATER DR DUNEDIN FL 34698  PRESIDENT WARNER, JUDITH 639 EDGEWATER DR DUNEDIN FL 34698  VICE PRESIDENT CROOK, THOMAS M 639 EDGEWATER DR DUNEDIN FL 34698  TREASURER BLACKBURN GLORIA R 639 EDGEWATER DR	Delete	STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		☐ Chang	e Addition	
STREET ADDRESS CITY-ST-ZIP DUNEDIN FL. 34698  TITLE NAME  STREET ADDRESS CITY-ST-ZIP TITLE NAME  STREET ADDRESS CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CHange Add		AME BLACKBURN GLORIA R  639. EDGEWATER DR  TY-ST-ZIP  DUNEDIN FL 34698  Delete  Delete  TILE  NAME    Delete	STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698 CITY-ST-ZIP TILE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-Z	CITY-ST-ZIP DUNEDIN FL 34698 CITY-ST-ZIP  TITLE CHange Addition  NAME	CITY-ST-ZIP DUNEDIN FL 34698 CITY-ST-ZIP  TITLE Change Addition NAME	CITY-ST-ZIP DUNEDIN FL 34698 CITY-ST-ZIP  TITLE Change Addition NAME	STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CONTROL  CHANGE	STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CONTROL  CHANGE	NAME STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698 TITLE NAME  NAME  NAME  STREET ADDRESS CITY-ST-ZIP  DUNEDIN FL 34698  Delete TITLE NAME	NAME STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698 TITLE NAME  NAME  NAME  STREET ADDRESS CITY-ST-ZIP  DUNEDIN FL 34698  Delete TITLE NAME	TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SY-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME	639 EDGEWATER DR DUNEDIN FL 34698  PRESIDENT WARNER, JUDITH 639 EDGEWATER DR DUNEDIN FL 34698  VICE PRESIDENT CROOK, THOMAS M 639 EDGEWATER DR DUNEDIN FL 34698  TREASURER BLACKBURN GLORIA R 639 EDGEWATER DR	Delete  Delete	STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME		☐ Chang	e Addition	
STREET ADDRESS CITY-ST-ZIP  DUNEDIN FI. 34698  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  CTTY-ST-ZIP  STREET ADDRESS CITY-ST-ZIP  CTTY-ST-ZIP  STREET ADDRESS CTTY-ST-ZIP	☐ Change ☐ Addition	AME BLACKBURN GLORIA R  GREET ADDRESS GTY-ST-ZIP  TULE  MAME  DETECT ADDRESS TY-ST-ZIP  DETECT ADDRESS TY-ST-ZIP  DETECT ADDRESS TY-ST-ZIP  NAME  STREET ADDRESS TY-ST-ZIP  NAME  STREET ADDRESS TY-ST-ZIP  NAME  STREET ADDRESS TY-ST-ZIP	STREET ADDRESS CITY-ST-ZIP  DUNEDIN FL 34698  TITLE NAME STREET ADDRESS CITY-ST-ZIP  Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP  CITY-ST-ZIP  STREET ADDRESS CITY-ST-ZIP  STREET ADDRESS CITY-ST-ZIP	CITY-ST-ZIP  DUNEDIN FL 34698  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP	CITY-ST-ZIP  DUNEDIN FI. 34698  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP	CITY-ST-ZIP  DUNEDIN FL 34698  CITY-ST-ZIP	STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE NAME STREET ADDRESS CITY-ST-ZIP  Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP  CITY-ST-ZIP  STREET ADDRESS CITY-ST-ZIP	STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE NAME STREET ADDRESS CITY-ST-ZIP  Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP  CITY-ST-ZIP  STREET ADDRESS CITY-ST-ZIP	NAME STREET ADDRESS CITY-ST-ZIP TITLÉ NAME STREET ADDRESS CITY-ST-ZIP  DUNEDIN FL 34698  Detete TITLE NAME STREET ADDRESS CITY-ST-ZIP  CITY-ST-ZIP  NAME STREET ADDRESS CITY-ST-ZIP  NAME STREET ADDRESS CITY-ST-ZIP	NAME STREET ADDRESS CITY-ST-ZIP TITLÉ NAME STREET ADDRESS CITY-ST-ZIP  DUNEDIN FL 34698  Detete TITLE NAME STREET ADDRESS CITY-ST-ZIP  CITY-ST-ZIP  NAME STREET ADDRESS CITY-ST-ZIP  NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	639 EDGEWATER DR DUNEDIN FL 34698  PRESIDENT WARNER, JUDITH 639 EDGEWATER DR DUNEDIN FL 34698  VICE PRESIDENT CROOK, THOMAS M 639 EDGEWATER DR DUNEDIN FL 34698  TREASURER BLACKBURN GLORIA R 639 EDGEWATER DR	Delete  Delete	STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		☐ Chang	e Addition	
STREET ADDRESS CITY-ST-ZIP  DUNEDIN FI. 34698  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE Delete TITLE NAME  Delete TITLE NAME	☐ Change ☐ Addition	AME BLACKBURN GLORIA R  GREET ADDRESS G17-ST-ZIP  TILE  AMA  IREET ADDRESS TY-ST-ZIP  DUINEDIN FL 34698  Delete  TITLE  NAME  STREET ADDRESS CITY-ST-ZIP  TO Delete  TITLE  NAME  Addition  NAME	STREET ADDRESS CITY-ST-ZIP DUNEDIN FI. 34698 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP  Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE Delete TITLE NAME TITLE NAME NAME NAME	CITY-ST-ZIP  DUNEDIN FL 34698  CITY-ST-ZIP  TITLÉ NAME STREET ADDRESS CITY-ST-ZIP	CITY-ST-ZIP  DUNEDIN FI. 34698  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	CITY-ST-ZIP  DUNEDIN FL 34698  CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME  CITY-ST-ZIP  TITLE NAME  CITY-ST-ZIP  CITY-ST-ZIP  TITLE NAME  CITY-ST-ZIP	STREET ADDRESS CITY-ST-ZIP DUNEDIN FI. 34698 TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE Delete TITLE NAME TITLE NAME TITLE NAME TITLE NAME TITLE NAME NAME NAME NAME	STREET ADDRESS CITY-ST-ZIP DUNEDIN FI. 34698 TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE Delete TITLE NAME TITLE NAME TITLE NAME TITLE NAME TITLE NAME NAME NAME NAME	NAME STREET ADDRESS CITY-ST-ZIP TITLÉ NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE NAME TITLE NAME TITLE NAME  CITY-ST-ZIP  TITLE NAME  CITY-ST-ZIP  TITLE NAME  NAME  NAME  STREET ADDRESS CITY-ST-ZIP  CITY-ST-ZIP  CHange Addition NAME	NAME STREET ADDRESS CITY-ST-ZIP TITLÉ NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE NAME TITLE NAME TITLE NAME  CITY-ST-ZIP  TITLE NAME  CITY-ST-ZIP  TITLE NAME  NAME  NAME  STREET ADDRESS CITY-ST-ZIP  CITY-ST-ZIP  CHange Addition NAME	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	639 EDGEWATER DR DUNEDIN FL 34698  PRESIDENT WARNER, JUDITH 639 EDGEWATER DR DUNEDIN FL 34698  VICE PRESIDENT CROOK, THOMAS M 639 EDGEWATER DR DUNEDIN FL 34698  TREASURER BLACKBURN GLORIA R 639 EDGEWATER DR	Delete  Delete  Delete	STREET ADDRESS CITY-ST-ZIP  TITLE NAME		☐ Chang	e Addition	
STREET ADDRESS CITY-ST-ZIP  DUNEDIN FI. 34698  TITLE NAME STREET ADDRESS CITY-ST-ZIP  CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  TOTALE STREET ADDRESS CITY-ST-ZIP  CITY-ST-ZIP  TOTALE STREET ADDRESS CITY-ST-ZIP	Change Addition  Change Addition	AME BLACKBURN GLORIA R  GREET ADDRESS G17-ST-ZIP  TILE  AME  TREET ADDRESS TY-ST-ZIP  DUINEDIN FL 34698  TILE  NAME  STREET ADDRESS CITY-ST-ZIP  TILE  NAME  STREET ADDRESS CITY-ST-ZIP  TILE  NAME  STREET ADDRESS CITY-ST-ZIP  TILE  NAME  NAME  STREET ADDRESS CITY-ST-ZIP  TY-ST-ZIP	STREET ADDRESS CITY-ST-ZIP  DUNED IN FL 34698  TITLE NAME STREET ADDRESS CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  TOTALE STREET ADDRESS CITY-ST-ZIP  CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  CITY-ST-ZIP	CITY-ST-ZIP  DUNEDIN FI. 34698  CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP  Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP	CITY-ST-ZIP  DUNRIDIN FI. 34698  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP	CITY-ST-ZIP  DUNEDIN FI. 34698  CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP  Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP	STREET ADDRESS CITY-ST-ZIP DUNED IN FI. 34698 TITLE NAME STREET ADDRESS CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  STREET ADDRESS CITY-ST-ZIP  CITY-ST-ZIP  STREET ADDRESS CITY-ST-ZIP  CITY-ST-ZIP  STREET ADDRESS CITY-ST-ZIP	STREET ADDRESS CITY-ST-ZIP DUNED IN FL 34698 TITLE NAME STREET ADDRESS CITY-ST-ZIP  CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  CITY-ST-ZIP	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP	639 EDGEWATER DR DUNEDIN FL 34698  PRESIDENT WARNER, JUDITH 639 EDGEWATER DR DUNEDIN FL 34698  VICE PRESIDENT CROOK, THOMAS M, 639 EDGEWATER DR DUNEDIN FL 34698  TREASURER BLACKBURN GLORIA R 639 EDGEWATER DR DUNEDIN FL 34698	Delete  Delete  Delete  Delete	STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Chang	R Addition  a Addition  a Addition  Addition	
STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  12. 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 report or supplemental 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 direct	Change Addition  Change Addition  Change Addition	BLACKBURN GLORIA R  639. EDGEWATER DR  DUNRDIN FL. 34698  TILE  MARE  REET ADDRESS  CITY-ST-ZIP  Delete  TILE  NAME  STREET ADDRESS  CITY-ST-ZIP  Z. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3Xi). Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.	STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  12. 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 report or supplemental report is true and accurrate 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.	CITY-ST-ZIP  DUNEDIN FI. 34698  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  1. Inte  Delete  TITLE  Delete  TITLE  CITY-ST-ZIP  CITY-ST-ZIP  1. Inte  Delete  TITLE  CITY-ST-ZIP  CITY-ST-ZIP  1. Inte  Change  Addition  NAME  STREET ADDRESS  CITY-ST-ZIP  1. Intereby 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.	CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  12. 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 report or supplemental report is true and accurrate 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.	CITY-ST-ZIP  DUNEDIN FI. 34698  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  1. Inte  Delete  TITLE  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  1. Inte  Delete  TITLE  CITY-ST-ZIP  CITY-ST-ZIP  1. Intereby 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.	STREET ADDRESS CITY-ST-ZIP DUNED IN FI. 34 698  TITLE NAME STREET ADDRESS CITY-ST-ZIP  12. 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 report or supplemental report is true and accurrate 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.	STREET ADDRESS CITY-ST-ZIP DUNED IN FL. 34 698  TITLE NAME STREET ADDRESS CITY-ST-ZIP  12. 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 report or supplemental report is true and accurrate 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.	NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  12. 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 report or suppliemental report is true and accurate and that my signature shall have the same legal effect as if made under certify 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.	NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  12. 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 report or suppliemental report is true and accurate and that my signature shall have the same legal effect as if made under certify 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.	TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby a indicated of the cor	639 EDGEWATER DR DUNEDIN FL 34698  PRESIDENT WARNER, JUDITH 639 EDGEWATER DR DUNEDIN FL 34698  VICE PRESIDENT CROOK, THOMAS M, 639 EDGEWATER DR DUNEDIN FL 34698  TREASURER BLACKBURN GLORIA R 639 EDGEWATER DR DUNEDIN FL 34698  Certify that the information supplied with ion this report or supplemental report is poration or the receiver of trustee emporation or the receiver of trustee emporation or the receiver of trustee emporation.	Delete  Delete  Delete  Delete  Delete	STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TOTALE CONTROL  TOTALE NAME STREET ADDRESS CITY-ST-ZIP  TOTALE NAME STREET ADDRESS CITY-ST-ZIP  TOTALE NAME STREET ADDRESS CITY-ST-ZIP  CONTROL  TOTALE NAME STREET ADDRESS CITY-ST-ZIP  TO	same legal effect as if made under or	Chang	e Addition  e Addition  e Addition  e Addition	
STREET ADDRESS 639 EDGEWATER DR STREET ADDRESS		USS EDGENTER DR	1 DUNEDIN FL 34698	DUNEDIN FE 34078	DUNEDIN FE 34070	DUNEDIN FE 34070	NOTABLE I DIENTEDINE ET STAGES IL CHI-SI-SE I	AITY CT 710 I THE TOTAL THE ALLOAD I AITY CT 710	OJY EDGEWATER DR	OJY EDGEWATER DR	NAME STREET ADDRESS CITY-ST-ZIP	639 EDGEWATER DR DUNEDIN FL 34698  PRESIDENT WARNER, JUDITH 639 EDGEWATER DR DUNEDIN FL 34698  VICE PRESIDENT	Delote	STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP				
CROOK, THOMAS M,	Charge C Audition	IRIFI ADDRESS 1 4 3 0 TO COUT LA MOUD TO TO TO THE STREET ADDRESS !	039 EDGEWATER DR	CITY-SI-ZIP DUNEDIN FL 34698 CITY-SI-ZIP	CITY-ST-ZIP DUNEDIN FL 34698 CITY-ST-ZIP	CITY-ST-ZIP DUNEDIN FL 34698 CITY-ST-ZIP	OJY EDGEWATER DR	UJ9 EDGEWATER DR		STREET ADDRESS 4 2.0 DED CENTA PETER DED	TITLE NAME STREET ADDRESS CITY-ST-ZIP	639 EDGEWATER DR DUNEDIN FL 34698  PRESIDENT 7  WARNER, JUDITH  639 EDGEWATER DR DUNEDIN FL 34698	Delote	STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP				
IMLE VICE PRESIDENT. Delete MLE Change Ad	☐ Change ☐ Addition		STREET ADDRESS 639 EDGEWATER DR STREET ADDRESS	STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP	SIRECT ADDRESS 639 EDGEWATER DR STREET ADDRESS CHY-ST-ZIP DUNEDIN FL 34698 CHY-ST-ZIP	SIRECT ADDRESS 639 EDGEWATER DR STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698 CITY-ST-ZIP	STREET ADDRESS 639 EDGEWATER DR STREET ADDRESS	STREET ADDRESS 639 EDGEWATER DR STREET ADDRESS		CROOK, THOMAS PL.	TITLE NAME STREET ADDRESS	639 EDGEWATER DR DUNEDIN FL 34698  PRESIDENT 7 WARNER, JUDITH 639 EDGEWATER DR	7	STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		☐ Chang	je □ Additior	CR2E037 (1
CITY-SI-78P DUNEDIN FL 34698 CITY-SI-78P	☐ Channe ☐ Addillon	CROOK, THOMAS M,	NAME CROOK, THOMAS M, SIREET ADDRESS 639 EDGEWATER DR STREET ADDRESS	NAME CROOK, THOMAS M, SIREET ADDRESS CITY-SI-ZIP DUNED IN FL 34698  NAME SIREET ADDRESS CITY-SI-ZIP CITY-SI-ZIP	NAME CROOK, THOMAS M, SIRET ADDRESS CITY-ST-ZIP DUNED IN FL 34698  NAME SIRET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	NAME CROOK, THOMAS M, SIRET ADDRESS CITY-ST-ZIP DUNED IN FL 34698  MAME SIRET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	NAME CROOK, THOMAS M, SIREET ADDRESS STREET ADDRESS	NAME CROOK, THOMAS M, STREET ADDRESS 639 EDGEWATER DR STREET ADDRESS	NAME CROOK, THOMAS M,		TITLE NAME	639 EDGEWATER DR DUNEDIN FL 34698 PRESIDENT 7 WARNER, JUDITH	7	STREET ADDRESS CITY-ST-ZIP TITLE NAME		Chang	pe 🔲 Addition	CR2E037 (1
STREET ADDRESS 639 EDGEWATER DR		CROOK, THOMAS M,	NAME CROOK, THOMAS M, SIREET ADDRESS 639 EDGEWATER DR STREET ADDRESS	NAME CROOK, THOMAS M, SIREET ADDRESS CITY-SI-ZIP DUNED IN FL 34698  NAME SIREET ADDRESS CITY-SI-ZIP CITY-SI-ZIP	NAME CROOK, THOMAS M, SIRET ADDRESS CITY-ST-ZIP DUNED IN FL 34698  NAME SIRET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	NAME CROOK, THOMAS M, SIRET ADDRESS CITY-ST-ZIP DUNED IN FL 34698  MAME SIRET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	NAME CROOK, THOMAS M, SIREET ADDRESS STREET ADDRESS	NAME CROOK, THOMAS M, STREET ADDRESS 639 EDGEWATER DR STREET ADDRESS	NAME CROOK, THOMAS M,		TITLE	639 EDGEWATER DR DUNEDIN FL 34698	7	STREET ADDRESS CITY-ST-ZIP TITLE		☐ Chang	pe 🔲 Addition	CR2E037 (1
STREET ADDRESS 639 EDGEWATER DR		TILE VICE PRESIDENT Delete TITLE Change Addition	TITLE VICE PRESIDENT Delete TITLE CROOK, THOMAS M, STREET ADDRESS 639 EDGEWATER DR STREET ADDRESS	INTLE VICE PRESIDENT Delete NAME CROOK, THOMAS M, STREET ADDRESS CITY-SI-ZIP DUNED IN FL 34698  TITLE DELETE DELET	TITLE VICE PRESIDENT Delete NAME CROOK, THOMAS M, STREET ADDRESS CITY-ST-ZIP DUNED IN FL 34698  TITLE VICE PRESIDENT Delete NILE NAME CROOK, THOMAS M, STREET ADDRESS CITY-ST-ZIP  CHANGE Addition CROOK, THOMAS M, STREET ADDRESS CITY-ST-ZIP	TITLE VICE PRESIDENT Delete TITLE CROOK, THOMAS M, SIRET ADDRESS CITY-ST-ZIP DUNED IN FL 34698	TITLE VICE PRESIDENT Delete NILE CROOK, THOMAS M, STREET ADDRESS 639 EDGEWATER DR STREET ADDRESS	TITLE VICE PRESIDENT Delete NILE CROOK, THOMAS M. STREET ADDRESS 639 EDGEWATER DR STREET ADDRESS	TITLE VICE PRESIDENT Delete NAME CROOK, THOMAS M, Change Addition	ITTLE VICE PRESIDENT . Delete NTLE Change Addition	TITLE	639 EDGEWATER DR DUNEDIN FL 34698	7	STREET ADDRESS CITY-ST-ZIP TITLE		☐ Chang	e Addition	CR2E037 (1
STREET ADDRESS 639 EDGEWATER DR		TILE VICE PRESIDENT Delete TITLE Change Addition	TITLE VICE PRESIDENT Delete TITLE CROOK, THOMAS M, STREET ADDRESS 639 EDGEWATER DR STREET ADDRESS	INTLE VICE PRESIDENT Delete NAME CROOK, THOMAS M, STREET ADDRESS CITY-SI-ZIP DUNED IN FL 34698  TITLE DELETE DELET	TITLE VICE PRESIDENT Delete NAME CROOK, THOMAS M, STREET ADDRESS CITY-ST-ZIP DUNED IN FL 34698  TITLE VICE PRESIDENT Delete NILE NAME CROOK, THOMAS M, STREET ADDRESS CITY-ST-ZIP  CHANGE Addition CROOK, THOMAS M, STREET ADDRESS CITY-ST-ZIP	TITLE VICE PRESIDENT Delete TITLE CROOK, THOMAS M, SIRET ADDRESS CITY-ST-ZIP DUNED IN FL 34698	TITLE VICE PRESIDENT Delete NILE CROOK, THOMAS M, STREET ADDRESS 639 EDGEWATER DR STREET ADDRESS	TITLE VICE PRESIDENT Delete NILE CROOK, THOMAS M. STREET ADDRESS 639 EDGEWATER DR STREET ADDRESS	TITLE VICE PRESIDENT Delete NAME CROOK, THOMAS M, Change Addition	ITTLE VICE PRESIDENT . Delete NTLE Change Addition	TITLE	639 EDGEWATER DR DUNEDIN FL 34698	7	STREET ADDRESS CITY-ST-ZIP TITLE		☐ Chang	e Addition	CR2E037 (1
STREET ADDRESS 639 EDGEWATER DR		TILE VICE PRESIDENT Delete TILE CROOK, THOMAS M. AME CROOK, THOMAS M.	TITLE VICE PRESIDENT Delete TITLE CROOK, THOMAS M. STREET ADDRESS 639 EDGEWATER DR STREET ADDRESS	TITLE VICE PRESIDENT Delete TITLE CROOK, THOMAS M. STREET ADDRESS CITY-ST-ZIP DUNED IN FL 34698 CITY-ST-ZIP	TITLE VICE PRESIDENT Delete TITLE CROOK, THOMAS M, SIREET ADDRESS CITY-ST-ZIP DUNED IN FL 34698 CITY-ST-ZIP	TITLE VICE PRESIDENT Delete TITLE CROOK, THOMAS M, SIREET ADDRESS CITY-ST-ZIP DUNED IN FL 34698 CITY-ST-ZIP	TITLE VICE PRESIDENT Delete TITLE CROOK, THOMAS M. STREET ADDRESS 639 EDGEWATER DR STREET ADDRESS	TITLE VICE PRESIDENT Delete TITLE CROOK, THOMAS M. STREET ADDRESS 639 EDGEWATER DR STREET ADDRESS	TITLE VICE PRESIDENT Delete INTLE CROOK, THOMAS M. NAME	IMLE VICE PRESIDENT Delete MILE Change Addition		639 EDGEWATER DR DUNEDIN FL 34698	7	STREET ADDRESS CITY-ST-ZIP		Chang	e Addition	CR2E037 (1
TITLE PRESIDENT Delete TITLE	☐ Change ☐ Addition ☐ S	TREET ADDRESS 639 EDGEWATER DR DUNEDIN FL 34698  TILE VICE PRESIDENT Delete TILE CROOK, THOMAS M, THOMAS M	STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT Delete NAME CROOK, THOMAS M, STREET ADDRESS 639 EDGEWATER DR STREET ADDRESS 639 EDGEWATER DR STREET ADDRESS STREET ADDRESS	STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT Delete NAME CROOK, THOMAS M, STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP  STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP  STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT Delete NAME CROOK, THOMAS M, STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP  STREET ADDRESS CITY-ST-ZIP  STREET ADDRESS CITY-ST-ZIP  STREET ADDRESS CITY-ST-ZIP	STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT Delete NAME CROOK, THOMAS M, STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP  STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT Delete NAME CROOK, THOMAS M, STREET ADDRESS 639 EDGEWATER DR STREET ADDRESS 639 EDGEWATER DR STREET ADDRESS	STREET ADDRESS CITY-ST-74P DUNEDIN FL 34698  ITILE VICE PRESIDENT CROOK, THOMAS M, STREET ADDRESS CITY-ST-74P  Delete TITLE CROOK, THOMAS M, STREET ADDRESS 639 EDGEWATER DR STREET ADDRESS CITY-ST-74P  TITLE Change Addition  STREET ADDRESS CITY-ST-74P	STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT Delete TITLE CROOK, THOMAS M,	STREET ADORESS CITY-ST-74P DUNEDIN FL 34698 STREET ADORESS CITY-ST-74P VICE PRESIDENT Delete INTLE Change Addition	CITY-ST-ZIP	639 EDGEWATER DR	7	STREET ADDRESS				E037 (1
STREET ADDRESS 639 EDGEWATER DR STREET ADDRESS		AME TREET ADDRESS ITY-SI-ZIP TILE VICE PRESIDENT CROOK, THOMAS M,  AME  NAME STREET ADDRESS CITY-SI-ZIP TILE  NAME STREET ADDRESS CITY-SI-ZIP TILE  NAME  NAME  NAME  NAME  NAME  NAME  NAME  NAME  NAME	MAME STREET ADDRESS CITY-SI-ZIP  DUNEDIN FL 34698  TITLE  VICE PRESIDENT  CROOK, THOMAS M, STREET ADDRESS CITY-SI-ZIP  Delete  TITLE  CROOK, THOMAS M, STREET ADDRESS CITY-SI-ZIP  CROOK, THOMAS M, STREET ADDRESS CITY-SI-ZIP  STREET ADDRESS CITY-SI-ZIP  TITLE  CROOK, THOMAS M, STREET ADDRESS STREET ADDRESS	NAME STREET ADDRESS CITY-ST-7NP DUNEDIN FL 34698  ITTLE VICE PRESIDENT CROOK, THOMAS M, STREET ADDRESS CITY-ST-2NP DUNEDIN FL 34698  ITTLE CROOK, THOMAS M, STREET ADDRESS CITY-ST-2NP DUNEDIN FL 34698  NAME STREET ADDRESS CITY-ST-2NP C	MAME STREET ADDRESS CITY-ST-ZIP  DUNEDIN FL 34698  ITILE  VICE PRESIDENT  CROOK, THOMAS M, STREET ADDRESS CITY-ST-ZIP  DUNEDIN FL 34698  NAME STREET ADDRESS CITY-ST-ZIP  CTY-ST-ZIP  DUNEDIN FL 34698  NAME STREET ADDRESS CITY-ST-ZIP  CTY-ST-ZIP  CTY-ST-ZIP  NAME STREET ADDRESS CITY-ST-ZIP	WARNER, JUDITH  639 EDGEWATER DR DUNEDIN FL 34698  ITTLE  VICE PRESIDENT  CROOK, THOMAS M, SIRET ADDRESS CITY-ST-ZIP  CITY-ST-ZIP  DUNEDIN FL 34698  NAME  STREET ADDRESS CITY-ST-ZIP  CTY-ST-ZIP  DUNEDIN FL 34698  NAME  STREET ADDRESS CITY-ST-ZIP  CTY-ST-ZIP  CTY-ST-ZIP	NAME STREET ADDRESS CITY-ST-ZIP  DUNEDIN FL 34698  TITLE  VICE PRESIDENT  CROOK, THOMAS M, STREET ADDRESS CITY-ST-ZIP  Delete  TITLE  CROOK, THOMAS M, STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	WARNER, JUDITH  STREET ADDRESS  GITY-SI-72P  DUNEDIN FL 34698  TITLE  VICE PRESIDENT  CROOK, THOMAS M,  STREET ADDRESS  CITY-SI-72P  TITLE  VICE PRESIDENT  CROOK, THOMAS M,  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS	NAME STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT CROOK, THOMAS M.	MAME STREET ADDRESS GITY-S1-ZIP  TITLE  WARNER, JUDITH STREET ADDRESS GITY-S1-ZIP  DUNEDIN FL 34698  TITLE  VICE PRESIDENT  Delete  NAME STREET ADDRESS CITY-S1-ZIP  TITLE  Change Addition		WARD, REV. PATRICK .		NAME				, ,
NAME WARD, REV. PATRICK J	25037	AME TREET ADDRESS ITY-SI-ZIP TILE VICE PRESIDENT CROOK, THOMAS M,  AME  NAME STREET ADDRESS CITY-SI-ZIP TILE  NAME STREET ADDRESS CITY-SI-ZIP TILE  NAME  NAME  NAME  NAME  NAME  NAME  NAME  NAME  NAME	MAME STREET ADDRESS CITY-SI-ZIP  DUNEDIN FL 34698  TITLE  VICE PRESIDENT  CROOK, THOMAS M, STREET ADDRESS CITY-SI-ZIP  Delete  TITLE  CROOK, THOMAS M, STREET ADDRESS CITY-SI-ZIP  CROOK, THOMAS M, STREET ADDRESS CITY-SI-ZIP  STREET ADDRESS CITY-SI-ZIP  TITLE  CROOK, THOMAS M, STREET ADDRESS STREET ADDRESS	NAME STREET ADDRESS CITY-ST-7NP DUNEDIN FL 34698  ITTLE VICE PRESIDENT CROOK, THOMAS M, STREET ADDRESS CITY-ST-2NP DUNEDIN FL 34698  ITTLE CROOK, THOMAS M, STREET ADDRESS CITY-ST-2NP DUNEDIN FL 34698  NAME STREET ADDRESS CITY-ST-2NP C	MAME STREET ADDRESS CITY-ST-ZIP  DUNEDIN FL 34698  ITILE  VICE PRESIDENT  CROOK, THOMAS M, STREET ADDRESS CITY-ST-ZIP  DUNEDIN FL 34698  NAME STREET ADDRESS CITY-ST-ZIP  CTY-ST-ZIP  DUNEDIN FL 34698  NAME STREET ADDRESS CITY-ST-ZIP  CTY-ST-ZIP  CTY-ST-ZIP  NAME STREET ADDRESS CITY-ST-ZIP	WARNER, JUDITH  639 EDGEWATER DR DUNEDIN FL 34698  ITTLE  VICE PRESIDENT  CROOK, THOMAS M, SIRET ADDRESS CITY-ST-ZIP  CITY-ST-ZIP  DUNEDIN FL 34698  NAME  STREET ADDRESS CITY-ST-ZIP  CTY-ST-ZIP  DUNEDIN FL 34698  NAME  STREET ADDRESS CITY-ST-ZIP  CTY-ST-ZIP  CTY-ST-ZIP	NAME STREET ADDRESS CITY-ST-ZIP  DUNEDIN FL 34698  TITLE  VICE PRESIDENT  CROOK, THOMAS M, STREET ADDRESS CITY-ST-ZIP  Delete  TITLE  CROOK, THOMAS M, STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	WARNER, JUDITH  STREET ADDRESS  GITY-SI-72P  DUNEDIN FL 34698  TITLE  VICE PRESIDENT  CROOK, THOMAS M,  STREET ADDRESS  CITY-SI-72P  TITLE  VICE PRESIDENT  CROOK, THOMAS M,  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS	NAME STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT CROOK, THOMAS M.	MAME STREET ADDRESS GITY-S1-ZIP  TITLE  WARNER, JUDITH STREET ADDRESS GITY-S1-ZIP  DUNEDIN FL 34698  TITLE  VICE PRESIDENT  Delete  NAME STREET ADDRESS CITY-S1-ZIP  TITLE  Change Addition	TITLE NAME	CHAIRMAN TERATICE	. Delete					, <u>(</u>
CHAILMIN' (LDMIGHTO)	25037	AME TREET ADDRESS ITY-SI-ZIP TILE VICE PRESIDENT CROOK, THOMAS M,  AME  NAME STREET ADDRESS CITY-SI-ZIP TILE  NAME STREET ADDRESS CITY-SI-ZIP TILE  NAME  NAME  NAME  NAME  NAME  NAME  NAME  NAME  NAME	MAME STREET ADDRESS CITY-SI-ZIP  DUNEDIN FL 34698  TITLE  VICE PRESIDENT  CROOK, THOMAS M, STREET ADDRESS CITY-SI-ZIP  Delete  TITLE  CROOK, THOMAS M, STREET ADDRESS CITY-SI-ZIP  CROOK, THOMAS M, STREET ADDRESS CITY-SI-ZIP  STREET ADDRESS CITY-SI-ZIP  TITLE  CROOK, THOMAS M, STREET ADDRESS STREET ADDRESS	NAME STREET ADDRESS CITY-ST-7NP DUNEDIN FL 34698  ITTLE VICE PRESIDENT CROOK, THOMAS M, STREET ADDRESS CITY-ST-2NP DUNEDIN FL 34698  ITTLE CROOK, THOMAS M, STREET ADDRESS CITY-ST-2NP DUNEDIN FL 34698  NAME STREET ADDRESS CITY-ST-2NP C	MAME STREET ADDRESS CITY-ST-ZIP  DUNEDIN FL 34698  ITILE  VICE PRESIDENT  CROOK, THOMAS M, STREET ADDRESS CITY-ST-ZIP  DUNEDIN FL 34698  NAME STREET ADDRESS CITY-ST-ZIP  CTY-ST-ZIP  DUNEDIN FL 34698  NAME STREET ADDRESS CITY-ST-ZIP  CTY-ST-ZIP  CTY-ST-ZIP  NAME STREET ADDRESS CITY-ST-ZIP	WARNER, JUDITH  639 EDGEWATER DR DUNEDIN FL 34698  ITTLE  VICE PRESIDENT  CROOK, THOMAS M, SIRET ADDRESS CITY-ST-ZIP  CITY-ST-ZIP  DUNEDIN FL 34698  NAME  STREET ADDRESS CITY-ST-ZIP  CTY-ST-ZIP  DUNEDIN FL 34698  NAME  STREET ADDRESS CITY-ST-ZIP  CTY-ST-ZIP  CTY-ST-ZIP	NAME STREET ADDRESS CITY-ST-ZIP  DUNEDIN FL 34698  TITLE  VICE PRESIDENT  CROOK, THOMAS M, STREET ADDRESS CITY-ST-ZIP  Delete  TITLE  CROOK, THOMAS M, STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	WARNER, JUDITH  STREET ADDRESS  GITY-SI-72P  DUNEDIN FL 34698  TITLE  VICE PRESIDENT  CROOK, THOMAS M,  STREET ADDRESS  CITY-SI-72P  TITLE  VICE PRESIDENT  CROOK, THOMAS M,  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS	NAME STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT CROOK, THOMAS M.	MAME STREET ADDRESS GITY-S1-ZIP  TITLE  WARNER, JUDITH STREET ADDRESS GITY-S1-ZIP  DUNEDIN FL 34698  TITLE  VICE PRESIDENT  Delete  NAME STREET ADDRESS CITY-S1-ZIP  TITLE  Change Addition	TITLE	CHAIRMAN TERATICE	. Delete		ADDITIONS/CHANGES TO OFFICE			, <u>e</u>
CHAILMIN' (LDMIGHTO)	2E037 (	AME TREET ADDRESS ITY-SI-ZIP TILE VICE PRESIDENT CROOK, THOMAS M,  AME  NAME STREET ADDRESS CITY-SI-ZIP TILE  NAME STREET ADDRESS CITY-SI-ZIP TILE  NAME  NAME  NAME  NAME  NAME  NAME  NAME  NAME  NAME	MAME STREET ADDRESS CITY-SI-ZIP  DUNEDIN FL 34698  TITLE  VICE PRESIDENT  CROOK, THOMAS M, STREET ADDRESS CITY-SI-ZIP  Delete  TITLE  CROOK, THOMAS M, STREET ADDRESS CITY-SI-ZIP  CROOK, THOMAS M, STREET ADDRESS CITY-SI-ZIP  STREET ADDRESS CITY-SI-ZIP  TITLE  CROOK, THOMAS M, STREET ADDRESS STREET ADDRESS	NAME STREET ADDRESS CITY-ST-7NP DUNEDIN FL 34698  ITTLE VICE PRESIDENT CROOK, THOMAS M, STREET ADDRESS CITY-ST-2NP DUNEDIN FL 34698  ITTLE CROOK, THOMAS M, STREET ADDRESS CITY-ST-2NP DUNEDIN FL 34698  NAME STREET ADDRESS CITY-ST-2NP C	MAME STREET ADDRESS CITY-ST-ZIP  DUNEDIN FL 34698  ITILE  VICE PRESIDENT  CROOK, THOMAS M, STREET ADDRESS CITY-ST-ZIP  DUNEDIN FL 34698  NAME STREET ADDRESS CITY-ST-ZIP  CTY-ST-ZIP  DUNEDIN FL 34698  NAME STREET ADDRESS CITY-ST-ZIP  CTY-ST-ZIP  CTY-ST-ZIP  NAME STREET ADDRESS CITY-ST-ZIP	WARNER, JUDITH  639 EDGEWATER DR DUNEDIN FL 34698  ITTLE  VICE PRESIDENT  CROOK, THOMAS M, SIRET ADDRESS CITY-ST-ZIP  CITY-ST-ZIP  DUNEDIN FL 34698  NAME  STREET ADDRESS CITY-ST-ZIP  CTY-ST-ZIP  DUNEDIN FL 34698  NAME  STREET ADDRESS CITY-ST-ZIP  CTY-ST-ZIP  CTY-ST-ZIP	NAME STREET ADDRESS CITY-ST-ZIP  DUNEDIN FL 34698  TITLE  VICE PRESIDENT  CROOK, THOMAS M, STREET ADDRESS CITY-ST-ZIP  Delete  TITLE  CROOK, THOMAS M, STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	WARNER, JUDITH  STREET ADDRESS  GITY-SI-72P  DUNEDIN FL 34698  TITLE  VICE PRESIDENT  CROOK, THOMAS M,  STREET ADDRESS  CITY-SI-72P  TITLE  VICE PRESIDENT  CROOK, THOMAS M,  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS	NAME STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT CROOK, THOMAS M.	MAME STREET ADDRESS GITY-S1-ZIP  TITLE  WARNER, JUDITH STREET ADDRESS GITY-S1-ZIP  DUNEDIN FL 34698  TITLE  VICE PRESIDENT  Delete  NAME STREET ADDRESS CITY-S1-ZIP  TITLE  Change Addition	TITLE	CHAIRMAN TERATICE	. Delete		ADDITIONS/CHANGES TO OFFICE			, <u>(</u>
CHAILMIN' (LDMIGHTO)	2E037 (1	AME TREET ADDRESS ITY-SI-ZIP TILE VICE PRESIDENT CROOK, THOMAS M,  AME  NAME STREET ADDRESS CITY-SI-ZIP TILE  NAME STREET ADDRESS CITY-SI-ZIP TILE  NAME  NAME  NAME  NAME  NAME  NAME  NAME  NAME  NAME	MAME STREET ADDRESS CITY-SI-ZIP  DUNEDIN FL 34698  TITLE  VICE PRESIDENT  CROOK, THOMAS M, STREET ADDRESS CITY-SI-ZIP  Delete  TITLE  CROOK, THOMAS M, STREET ADDRESS CITY-SI-ZIP  CROOK, THOMAS M, STREET ADDRESS CITY-SI-ZIP  STREET ADDRESS CITY-SI-ZIP  TITLE  CROOK, THOMAS M, STREET ADDRESS STREET ADDRESS	NAME STREET ADDRESS CITY-ST-7NP DUNEDIN FL 34698  ITTLE VICE PRESIDENT CROOK, THOMAS M, STREET ADDRESS CITY-ST-2NP DUNEDIN FL 34698  ITTLE CROOK, THOMAS M, STREET ADDRESS CITY-ST-2NP DUNEDIN FL 34698  NAME STREET ADDRESS CITY-ST-2NP C	MAME STREET ADDRESS CITY-ST-ZIP  DUNEDIN FL 34698  ITILE  VICE PRESIDENT  CROOK, THOMAS M, STREET ADDRESS CITY-ST-ZIP  DUNEDIN FL 34698  NAME STREET ADDRESS CITY-ST-ZIP  CTY-ST-ZIP  DUNEDIN FL 34698  NAME STREET ADDRESS CITY-ST-ZIP  CTY-ST-ZIP  CTY-ST-ZIP  NAME STREET ADDRESS CITY-ST-ZIP	WARNER, JUDITH  639 EDGEWATER DR DUNEDIN FL 34698  ITTLE  VICE PRESIDENT  CROOK, THOMAS M, SIRET ADDRESS CITY-ST-ZIP  CITY-ST-ZIP  DUNEDIN FL 34698  NAME  STREET ADDRESS CITY-ST-ZIP  CTY-ST-ZIP  DUNEDIN FL 34698  NAME  STREET ADDRESS CITY-ST-ZIP  CTY-ST-ZIP  CTY-ST-ZIP	NAME STREET ADDRESS CITY-ST-ZIP  DUNEDIN FL 34698  TITLE  VICE PRESIDENT  CROOK, THOMAS M, STREET ADDRESS CITY-ST-ZIP  Delete  TITLE  CROOK, THOMAS M, STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	WARNER, JUDITH  STREET ADDRESS  GITY-SI-72P  DUNEDIN FL 34698  TITLE  VICE PRESIDENT  CROOK, THOMAS M,  STREET ADDRESS  CITY-SI-72P  TITLE  VICE PRESIDENT  CROOK, THOMAS M,  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS	NAME STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT CROOK, THOMAS M.	MAME STREET ADDRESS GITY-S1-ZIP  TITLE  WARNER, JUDITH STREET ADDRESS GITY-S1-ZIP  DUNEDIN FL 34698  TITLE  VICE PRESIDENT  Delete  NAME STREET ADDRESS CITY-S1-ZIP  TITLE  Change Addition	TITLE	CHAIRMAN TERATICE	. Delete		ADDITIONS/CHANGES TO OFFICE			, (00/
TITLE CHAIRMAN TEXTILET. Delete TITLE Change Ad	ZE037 (11)	AME TREET ADDRESS ITY-SI-ZIP TILE VICE PRESIDENT CROOK, THOMAS M,  AME  NAME STREET ADDRESS CITY-SI-ZIP TILE  NAME STREET ADDRESS CITY-SI-ZIP TILE  NAME  NAME  NAME  NAME  NAME  NAME  NAME  NAME  NAME	MAME STREET ADDRESS CITY-SI-ZIP  DUNEDIN FL 34698  TITLE  VICE PRESIDENT  CROOK, THOMAS M, STREET ADDRESS CITY-SI-ZIP  Delete  TITLE  CROOK, THOMAS M, STREET ADDRESS CITY-SI-ZIP  CROOK, THOMAS M, STREET ADDRESS CITY-SI-ZIP  STREET ADDRESS CITY-SI-ZIP  TITLE  CROOK, THOMAS M, STREET ADDRESS STREET ADDRESS	NAME STREET ADDRESS CITY-ST-7NP DUNEDIN FL 34698  ITTLE VICE PRESIDENT CROOK, THOMAS M, STREET ADDRESS CITY-ST-2NP DUNEDIN FL 34698  ITTLE CROOK, THOMAS M, STREET ADDRESS CITY-ST-2NP DUNEDIN FL 34698  NAME STREET ADDRESS CITY-ST-2NP C	MAME STREET ADDRESS CITY-ST-ZIP  DUNEDIN FL 34698  ITILE  VICE PRESIDENT  CROOK, THOMAS M, STREET ADDRESS CITY-ST-ZIP  DUNEDIN FL 34698  NAME STREET ADDRESS CITY-ST-ZIP  CTY-ST-ZIP  DUNEDIN FL 34698  NAME STREET ADDRESS CITY-ST-ZIP  CTY-ST-ZIP  CTY-ST-ZIP  NAME STREET ADDRESS CITY-ST-ZIP	WARNER, JUDITH  639 EDGEWATER DR DUNEDIN FL 34698  ITTLE  VICE PRESIDENT  CROOK, THOMAS M, SIRET ADDRESS CITY-ST-ZIP  CITY-ST-ZIP  DUNEDIN FL 34698  NAME  STREET ADDRESS CITY-ST-ZIP  CTY-ST-ZIP  DUNEDIN FL 34698  NAME  STREET ADDRESS CITY-ST-ZIP  CTY-ST-ZIP  CTY-ST-ZIP	NAME STREET ADDRESS CITY-ST-ZIP  DUNEDIN FL 34698  TITLE  VICE PRESIDENT  CROOK, THOMAS M, STREET ADDRESS CITY-ST-ZIP  Delete  TITLE  CROOK, THOMAS M, STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	WARNER, JUDITH  STREET ADDRESS  GITY-SI-72P  DUNEDIN FL 34698  TITLE  VICE PRESIDENT  CROOK, THOMAS M,  STREET ADDRESS  CITY-SI-72P  TITLE  VICE PRESIDENT  CROOK, THOMAS M,  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS	NAME STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT CROOK, THOMAS M.	MAME STREET ADDRESS GITY-S1-ZIP  TITLE  WARNER, JUDITH STREET ADDRESS GITY-S1-ZIP  DUNEDIN FL 34698  TITLE  VICE PRESIDENT  Delete  NAME STREET ADDRESS CITY-S1-ZIP  TITLE  Change Addition					ADDITIONS/CHANGES TO OFFICE			, (6) - -
	Crange C agree C 1/0	AME TREET ADDRESS ITY-SI-ZIP TILE VICE PRESIDENT CROOK, THOMAS M,  AME  NAME STREET ADDRESS CITY-SI-ZIP TILE  NAME STREET ADDRESS CITY-SI-ZIP TILE  NAME  NAME  NAME  NAME  NAME  NAME  NAME  NAME  NAME	MAME STREET ADDRESS CITY-SI-ZIP  DUNEDIN FL 34698  TITLE  VICE PRESIDENT  CROOK, THOMAS M, STREET ADDRESS CITY-SI-ZIP  Delete  TITLE  CROOK, THOMAS M, STREET ADDRESS CITY-SI-ZIP  CROOK, THOMAS M, STREET ADDRESS CITY-SI-ZIP  STREET ADDRESS CITY-SI-ZIP  TITLE  CROOK, THOMAS M, STREET ADDRESS STREET ADDRESS	NAME STREET ADDRESS CITY-ST-7NP DUNEDIN FL 34698  ITTLE VICE PRESIDENT CROOK, THOMAS M, STREET ADDRESS CITY-ST-2NP DUNEDIN FL 34698  ITTLE CROOK, THOMAS M, STREET ADDRESS CITY-ST-2NP DUNEDIN FL 34698  NAME STREET ADDRESS CITY-ST-2NP C	MAME STREET ADDRESS CITY-ST-ZIP  DUNEDIN FL 34698  ITILE  VICE PRESIDENT  CROOK, THOMAS M, STREET ADDRESS CITY-ST-ZIP  DUNEDIN FL 34698  NAME STREET ADDRESS CITY-ST-ZIP  CTY-ST-ZIP  DUNEDIN FL 34698  NAME STREET ADDRESS CITY-ST-ZIP  CTY-ST-ZIP  CTY-ST-ZIP  NAME STREET ADDRESS CITY-ST-ZIP	WARNER, JUDITH  639 EDGEWATER DR DUNEDIN FL 34698  ITTLE  VICE PRESIDENT  CROOK, THOMAS M, SIRET ADDRESS CITY-ST-ZIP  CITY-ST-ZIP  DUNEDIN FL 34698  NAME  STREET ADDRESS CITY-ST-ZIP  CTY-ST-ZIP  DUNEDIN FL 34698  NAME  STREET ADDRESS CITY-ST-ZIP  CTY-ST-ZIP  CTY-ST-ZIP	NAME STREET ADDRESS CITY-ST-ZIP  DUNEDIN FL 34698  TITLE  VICE PRESIDENT  CROOK, THOMAS M, STREET ADDRESS CITY-ST-ZIP  Delete  TITLE  CROOK, THOMAS M, STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	WARNER, JUDITH  STREET ADDRESS  GITY-SI-72P  DUNEDIN FL 34698  TITLE  VICE PRESIDENT  CROOK, THOMAS M,  STREET ADDRESS  CITY-SI-72P  TITLE  VICE PRESIDENT  CROOK, THOMAS M,  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS	NAME STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT CROOK, THOMAS M.	MAME STREET ADDRESS GITY-S1-ZIP  TITLE  WARNER, JUDITH STREET ADDRESS GITY-S1-ZIP  DUNEDIN FL 34698  TITLE  VICE PRESIDENT  Delete  NAME STREET ADDRESS CITY-S1-ZIP  TITLE  Change Addition		OFFICERS AND DIF	ECTORS	11.		RS AND DIRECTORS	IN 10	- - - - -
10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		THE CHAIRMANI TERATIC: Delete THE WARD, REV. PATRICK J.  AME THEFT ADDRESS TITY-ST-ZIP  DUNEDIN FL 34698  THE PRESIDENT  WARNER, JUDITH  639 EDGEWATER DR THREET ADDRESS THY-ST-ZIP  WARNER, JUDITH  639 EDGEWATER DR DUNEDIN FL 34698  THE VICE PRESIDENT  Delete  THLE  Change Addition	TITLE WARD, REV. PATRICK J.  STREET ADDRESS CITY-ST-ZIP  TITLE  WARD, REV. PATRICK J.  STREET ADDRESS CITY-ST-ZIP  TITLE  WARD, REV. PATRICK J.  STREET ADDRESS CITY-ST-ZIP  TITLE  PRESIDENT  Delete  TITLE  NAME  STREET ADDRESS CITY-ST-ZIP  TITLE  Change  Addition	TITLE WARD, REV. PATRICK J.  STREET ADDRESS CITY-ST-ZIP  WARD, REV. PATRICK J.  STREET ADDRESS CITY-ST-ZIP  WARD, REV. PATRICK J.  STREET ADDRESS CITY-ST-ZIP  Delete  TITLE  NAME STREET ADDRESS CITY-ST-ZIP  DELETE  TITLE  Change  Addition	TITLE WARD, REV. PATRICK J.  STREET ADDRESS CITY-ST-ZIP  MAME  STREET ADDRESS CITY-ST-ZIP  CHATRMAN TEXATIC Delete  TITLE  WARD, REV. PATRICK J.  STREET ADDRESS CITY-ST-ZIP  DUNEDIN FL 34698  TITLE  NAME  STREET ADDRESS CITY-ST-ZIP  DUNEDIN FL 34698  TITLE  Change Addition	TITLE WARD, REV. PATRICK J.  STREET ADDRESS CITY-ST-ZIP  MAME  STREET ADDRESS CITY-ST-ZIP  CHATRMAN TEXATIC Delete  TITLE  WARD, REV. PATRICK J.  STREET ADDRESS CITY-ST-ZIP  DUNEDIN FL 34698  TITLE  NAME  STREET ADDRESS CITY-ST-ZIP  DUNEDIN FL 34698  TITLE  Change Addition	TITLE CHAIRMAN TEXATIC Delete TITLE Addition  STREET ADDRESS CITY-ST-ZIP  TITLE PRESIDENT Delete TITLE  WARD, REV. PATRICK J.  STREET ADDRESS CITY-SI-ZIP  TITLE PRESIDENT Delete TITLE  WARNER, JUDITH  STREET ADDRESS CITY-SI-ZIP  TITLE VICE PRESIDENT Delete TITLE  NAME  STREET ADDRESS CITY-SI-ZIP  TITLE VICE PRESIDENT Delete TITLE  CHAIRMAN TEXATIC Delete TITLE  NAME  STREET ADDRESS CITY-SI-ZIP  TITLE VICE PRESIDENT Delete TITLE  CHAIRMAN TEXATIC DELETE  STREET ADDRESS CITY-SI-ZIP  TITLE VICE PRESIDENT Delete TITLE  CHAIRMAN TEXATIC DELETE  STREET ADDRESS CITY-SI-ZIP  TITLE VICE PRESIDENT Delete TITLE  CROOK, THOMAS M.  STREET ADDRESS  639 EDGEWATER DR  STREET ADDRESS	TITLE CHAIRMAN: TEXATIC: Delete WARD, REV. PATRICK J. STREET ADDRESS CITY-SI-ZIP DUNEDIN FL 34698  TITLE PRESIDENT Delete TILE Change Addition STREET ADDRESS CITY-SI-ZIP  MAME STREET ADDRESS CITY-SI-ZIP  TITLE VICE PRESIDENT Delete TILE  WARNER, JUDITH STREET ADDRESS CITY-SI-ZIP  TITLE VICE PRESIDENT Delete TILE  NAME STREET ADDRESS CITY-SI-ZIP  TITLE VICE PRESIDENT Delete TILE  NAME STREET ADDRESS CITY-SI-ZIP  TITLE VICE PRESIDENT Delete TILE  CROOK, THOMAS M. STREET ADDRESS  STREET ADDRESS  639 EDGEWATER DR STREET ADDRESS	TITLE CHAIRMAN TEXATIC Delete TITLE NAME STREET ADDRESS CITY-SI-ZIP DUNEDIN FL 34698  TITLE PRESIDENT Delete TITLE Change Addition  WARD, REV. PATRICK J.  STREET ADDRESS CITY-SI-ZIP  TITLE PRESIDENT Delete TITLE  WARNER, JUDITH  STREET ADDRESS CITY-SI-ZIP  TITLE VICE PRESIDENT Delete TITLE  NAME  STREET ADDRESS CITY-SI-ZIP  TITLE VICE PRESIDENT Delete TITLE  Change Addition  Change Addition  Change Addition  Change Addition  Change Addition	TITLE CHAIRMAN TEXATIC Delete WARD, REV. PATRICK J. STREET ADDRESS CITY-SI-ZIP DUNEDIN FL 34698  TITLE PRESIDENT Delete TILE Change Addition STREET ADDRESS CITY-SI-ZIP CITY-SI-ZIP  WARDER, JUDITH STREET ADDRESS CITY-SI-ZIP  TITLE VICE PRESIDENT Delete TILE Change Addition STREET ADDRESS CITY-SI-ZIP  TITLE VICE PRESIDENT Delete TILE Change Addition STREET ADDRESS CITY-SI-ZIP  TITLE VICE PRESIDENT Delete TILE Change Addition								-
FEE-IS-\$61.25 Trust Fund Contribution Added to Fees Department of State	Department of State  INS/CHANGES TO OFFICERS AND DIRECTORS IN 10	Trust Fund Contribution. Added to Fees Department of State    Columbia   Colu	Trust Fund Contribution. Added to Fees Department of State  10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE CHAIRMAN FEATURE. Delete TITLE WARD, REV. PATRICK J. STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE PRESIDENT Delete TITLE CHANGE Addition STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE WARNER, JUDITH STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT Delete TITLE CHANGE Addition CROOK, THOMAS M. STREET ADDRESS CITY-ST-ZIP  TITLE VICE PRESIDENT Delete TITLE CROOK, THOMAS M. STREET ADDRESS CITY-ST-ZIP  TITLE VICE PRESIDENT Delete TITLE CROOK, THOMAS M. STREET ADDRESS CITY-ST-ZIP  TITLE VICE PRESIDENT Delete TITLE CROOK, THOMAS M. STREET ADDRESS CITY-ST-ZIP  TITLE VICE PRESIDENT Delete STREET ADDRESS STREET ADDRESS CITY-ST-ZIP  TITLE VICE PRESIDENT STREET ADDRESS CITY-ST-ZIP  TITLE VICE PRESIDENT STREET ADDRESS S	Trust Fund Contribution. Added to Fees Department of State  10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE CHATRMAN FEATURE Delete TITLE WARD, REV. PATRICK J NAME STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TRUST ADDRESS CITY-ST-ZIP  TITLE WARNER, JUDITH NAME STREET ADDRESS CITY-ST-ZIP  TITLE VICE PRESIDENT Delete TITLE  CROOK, THOMAS M, STREET ADDRESS CITY-ST-ZIP  TITLE VICE PRESIDENT Delete TITLE  CROOK, THOMAS M, STREET ADDRESS CITY-ST-ZIP  TITLE VICE PRESIDENT Delete TITLE  CROOK, THOMAS M, STREET ADDRESS CITY-ST-ZIP  DUNEDIN FL 34698  TRUST FUND CONTROL OF STREET ADDRESS CITY-ST-ZIP  TITLE VICE PRESIDENT Delete TITLE  CROOK, THOMAS M, STREET ADDRESS CITY-ST-ZIP  DUNEDIN FL 34698  TRUST FUND CONTROL OF STREET ADDRESS CITY-ST-ZIP  TOTAL OFFICERS AND DIRECTORS IN 10  Added to Fees Department of State  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  Change Addition  CHATRMAN FROM ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  CITY-ST-ZIP  TITLE CHANGES TO OFFICERS AND DIRECTORS IN 10  CHATRMAN FROM ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  CHATRMAN FROM ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  CHATRMAN FROM ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  CHATRMAN FROM ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  CHATRMAN FROM ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  CHATRMAN FROM ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  CHATRMAN FROM ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  CHATRMAN FROM ADDITIONS/CHANGES TO OFFICERS ADDITIONS/CHANGES	Trust Fund Contribution. Added to Fees Department of State  10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  ITTLE CHAIRMAN FEATURE Delete TITLE WARD, REV. PATRICK J NAME SIREFI ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  Trust Fund Contribution. Added to Fees Department of State  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  Change Addition STREFT ADDRESS CITY-ST-ZIP  TITLE PRESIDENT Delete TITLE Change Addition  WARNER, JUDITH NAME SIREFT ADDRESS CITY-ST-ZIP  TITLE VICE PRESIDENT Delete TITLE  CROOK, THOMAS M, SIREFT ADDRESS CITY-ST-ZIP  TITLE VICE PRESIDENT Delete TITLE  CROOK, THOMAS M, SIREFT ADDRESS CITY-ST-ZIP  DUNEDIN FL 34698  CITY-ST-ZIP  DUNEDIN FL 34698  Trust Fund Contribution. Added to Fees Department of State  ITTLE NAME  CROOK, THOMAS M, SIREFT ADDRESS CITY-ST-ZIP  CHAIRMAN FL Addition  Added to Fees Department of State  ITTLE NAME  SIREFT ADDRESS CITY-ST-ZIP  Change Addition	Trust Fund Contribution. Added to Fees Department of State  10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  ITTLE CHAIRMAN FEATURE Delete TITLE WARD, REV. PATRICK J NAME SIREFI ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  Trust Fund Contribution. Added to Fees Department of State  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  Change Addition STREFT ADDRESS CITY-ST-ZIP  TITLE PRESIDENT Delete TITLE Change Addition  WARNER, JUDITH NAME SIREFT ADDRESS CITY-ST-ZIP  TITLE VICE PRESIDENT Delete TITLE  CROOK, THOMAS M, SIREFT ADDRESS CITY-ST-ZIP  TITLE VICE PRESIDENT Delete TITLE  CROOK, THOMAS M, SIREFT ADDRESS CITY-ST-ZIP  DUNEDIN FL 34698  CITY-ST-ZIP  DUNEDIN FL 34698  Trust Fund Contribution. Added to Fees Department of State  ITTLE NAME  CROOK, THOMAS M, SIREFT ADDRESS CITY-ST-ZIP  CHAIRMAN FL Addition  Added to Fees Department of State  ITTLE NAME  SIREFT ADDRESS CITY-ST-ZIP  Change Addition	Trust Fund Contribution. Added to Fees Department of State  10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE CHAIRMAN FEATURE DATE DELETED DELE	Trust Fund Contribution. Added to Fees Department of State  10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE CHAIRMAN FEATURE DR CITY-ST-ZIP  WARD, REV. PATRICK J NAME STREET ADDRESS CITY-ST-ZIP  DUNEDIN FL 34698  TITLE PRESIDENT Delete TITLE  WARNER, JUDITH STREET ADDRESS CITY-ST-ZIP  DUNEDIN FL 34698  TITLE Change Addition  CROOK, THOMAS M, STREET ADDRESS  STREET ADDRESS  CITY-ST-ZIP  CROOK, THOMAS M, STREET ADDRESS  STREET ADDRESS  G39 EDGEWATER DR  CROOK, THOMAS M, STREET ADDRESS  STREET ADDRESS  G39 EDGEWATER DR  STREET ADDRESS  G39 EDGEWATER DR  STREET ADDRESS	Trust Fund Contribution Added to Fees Department of State  10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE CHAIRMAN TEXATIC Delete TITLE Change Addition WARD, REV. PATRICK J STREET ADDRESS CITY-SI-ZIP DUNEDIN FL 34698  TITLE PRESIDENT Delete TITLE Change Addition STREET ADDRESS CITY-SI-ZIP CITY-SI-ZIP CITY-SI-ZIP CITY-SI-ZIP DUNEDIN FL 34698  TITLE WARNER, JUDITH STREET ADDRESS CITY-SI-ZIP CITY-SI-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT Delete TITLE CITY-SI-ZIP CITY-SI-ZIP CITY-SI-ZIP CITY-SI-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT Delete TITLE CITY-SI-ZIP CITY-SI-ZIP CITY-SI-ZIP CITY-SI-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT Delete TITLE CITY-SI-ZIP CITY-	Trust Fund Contribution Added to Fees Department of State  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE CHAIRMAN FEATURE Delete TITLE NAME WARD, REV. PATRICK J. NAME STREET ADDRESS GITY-S1-ZIP DUNEDIN FL 34698  TITLE PRESIDENT Delete TITLE NAME WARNER, JUDITH STREET ADDRESS GITY-S1-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT Delete TITLE  Change Addition  Change Addition  Change Addition  Change Addition  Change Addition			T		· · · · · · · · · · · · · · · · · · ·			4
FILE NOW:  9. Election Campaign Financing \$5.00 May Be  Make Check Payable to  Trust Fund Contribution Added to Fees Department of State	Make Check Payable to Department of State  INS/CHANGES TO OFFICERS AND DIRECTORS IN 10	FILE NOW:  FEE-IS \$61.25  Department of State  Trust Fund Contribution.  The president Dunedin FL 34698  Trust Added to Fees  Trust Fund Contribution.  Added to Fees  Department of State  The president Draws Contribution.  The ward, rev. Patrick J Street Addition Dunedin FL 34698  Trust Fund Contribution.  The president Draws Contribution.  The ward of Fees  Department of State  The president Draws Contribution.  The ward of Fees  Department of State  The president Draws Contribution.  The ward of Fees  Department of State  The president Draws Contribution.  The ward of Fees  Department of State  The president Draws Contribution.  The ward of Fees  Department of State  The president Draws Contribution.  The ward of Fees  Department of State  Department of State  The president Draws Contribution.  The ward of Fees  Department of State  De	FILE NOW:  FEE-IS-\$61:25  Trust Fund Contribution.  Trust Fund Contrib	FILE NOW:  FEE-IS-\$61:25  Jivest Fund Contribution.  10.  OFFICERS AND DIRECTORS  11.  Added to Fees  Department of State  11.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  CHATRMAN:  LEAT LIC:  WARD, REV. PATRICK J.  STREET ADDRESS CITY-SI-ZIP  DUNED IN FL. 34698  TITLE  WARNER, JUDITH  WARNER, JUDITH  639 EDGEWATER DR  DUNED IN FL. 34698  TITLE  WARNER, JUDITH  639 EDGEWATER DR  DUNED IN FL. 34698  TITLE  VICE PRESIDENT  Delete  TITLE  CROOK, THOMAS M.  639 EDGEWATER DR  DUNED IN FL. 34698  TITLE  CROOK, THOMAS M.  639 EDGEWATER DR  DUNED IN FL. 34698  CITY-SI-ZIP  CROOK, THOMAS M.  639 EDGEWATER DR  DUNED IN FL. 34698  CITY-SI-ZIP  DUNED IN FL. 34698  CITY-SI-ZIP  CROOK, THOMAS M.  639 EDGEWATER DR  DUNED IN FL. 34698  CITY-SI-ZIP  DUNED IN FL. 34698	FILE NOW:  FEE-IS-\$61:25  Jivest Fund Contribution.  10.  OFFICERS AND DIRECTORS  11.  Added to Fees  Department of State  11.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  CHATRMAN:  LEAT LIC:  WARD, REV. PATRICK J.  SIREIT ADDRESS  CITY-SI-ZIP  DUNED IN FL 34698  TITLE  WARNER, JUDITH  WARNER, JUDITH  639 EDGEWATER DR  DUNED IN FL 34698  TITLE  WARNER, JUDITH  SIREIT ADDRESS  CITY-SI-ZIP  TITLE  VICE PRESIDENT  Delete  TITLE  CROOK, THOMAS M.  639 EDGEWATER DR  DUNED IN FL 34698  TITLE  CROOK, THOMAS M.  639 EDGEWATER DR  DUNED IN FL 34698  CITY-SI-ZIP  CROOK, THOMAS M.  GAME  SIREIT ADDRESS  CITY-SI-ZIP  CITY-SI-ZIP  DUNED IN FL 34698  CITY-SI-ZIP  CITY-SI-ZIP  CITY-SI-ZIP	FILE NOW:  FEE-IS-\$61:25  Jivest Fund Contribution.  10.  OFFICERS AND DIRECTORS  11.  Added to Fees  Department of State  11.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  CHATRMAN:  LEAT LIC:  WARD, REV. PATRICK J.  SIREIT ADDRESS  CITY-SI-ZIP  DUNED IN FL 34698  TITLE  WARNER, JUDITH  WARNER, JUDITH  639 EDGEWATER DR  DUNED IN FL 34698  TITLE  WARNER, JUDITH  SIREIT ADDRESS  CITY-SI-ZIP  TITLE  VICE PRESIDENT  Delete  TITLE  CROOK, THOMAS M.  639 EDGEWATER DR  DUNED IN FL 34698  TITLE  CROOK, THOMAS M.  639 EDGEWATER DR  DUNED IN FL 34698  CITY-SI-ZIP  CROOK, THOMAS M.  GAME  SIREIT ADDRESS  CITY-SI-ZIP  CITY-SI-ZIP  DUNED IN FL 34698  CITY-SI-ZIP  CITY-SI-ZIP  CITY-SI-ZIP	FILE NOW:  FEE-IS-\$61:26  Trust Fund Contribution.  Trust Fund Contribution.  Trust Fund Contribution.  Added to Fees  Department of State  10.  OFFICERS AND DIRECTORS  11.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE WARD, REV. PATRICK J.  STREET ADDRESS CITY-ST-ZIP  DUNEDIN FL 34698  TITLE WARNER, JUDITH NAME STREET ADDRESS CITY-ST-ZIP  TITLE WARNER, JUDITH STREET ADDRESS CITY-ST-ZIP  TITLE STREET ADDRE	FILE NOW:  FEE IS \$61:26  Trust Fund Contribution.  Trust Fund Contribution.  10.  OFFICERS AND DIRECTORS  11.  Added to Fees  Department of State  11.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE  WARD, REV. PATRICK J  SIREIT ADDRESS  GITY-SI-ZIP  TITLE  PRESIDENT  WARNER, JUDITH  MAME  SIREIT ADDRESS  CITY-SI-ZIP  TITLE  CROOK, THOMAS M  SIREIT ADDRESS  GITY-SI-ZIP  TITLE  VICE PRESIDENT  Delete  TITLE  SIREIT ADDRESS  CITY-SI-ZIP  TITLE  CROOK, THOMAS M  SIREIT ADDRESS  G39 EDGEWATER DR  DUNEDIN FL 34698  TITLE  CROOK, THOMAS M  SIREIT ADDRESS  G39 EDGEWATER DR  SIREIT ADDRESS  SIREIT ADDRESS  SIREIT ADDRESS  G39 EDGEWATER DR  SIREIT ADDRESS  G39 EDGEWATER DR  SIREIT ADDRESS  SIREIT ADDRESS  G39 EDGEWATER DR	FILE NOW:  9. Election Campaign Financing Trust Fund Contribution.  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  I'ILE NAME WARD, REV. PATRICK J SIREFI ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TILE WARNER, JUDITH STREET ADDRESS CITY-ST-ZIP  WARNER, JUDITH STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TILE VICE PRESIDENT DUNEDIN FL 34698  TILE VICE PRESIDENT Delete TILE Change Addition	FILE NOW:  FEE-IS-\$61:25  Delete  Trust Fund Contribution.  Added to Fees  Department of State  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE WARD, REV. PATRICK J SIREET ADDRESS CITY-S1-ZIP  DUNEDIN FL 34698  TITLE  WARNER, JUDITH SIREET ADDRESS CITY-S1-ZIP  WARNER, JUDITH SIREET ADDRESS CITY-S1-ZIP  DUNEDIN FL 34698  TITLE  WARNER, JUDITH SIREET ADDRESS CITY-S1-ZIP  DUNEDIN FL 34698  TITLE  WARNER, JUDITH SIREET ADDRESS CITY-S1-ZIP  DUNEDIN FL 34698  TITLE  Change  Addition  Change  Addition  Change  Addition  Change  Addition  Change  Addition  Change  Addition	SIGNATURE		and this is anticoher to sit the	Detrictured Animal strands the boar	ind when rejectation)	DATE		
Signature. Typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  FILE NOW:  9. Election Campaign Financing \$5.00 May Be Added to Fees  Trust Fund Contribution. Added to Fees  Department of State	Make Check Payable to  Department of State  INS/CHANGES TO OFFICERS AND DIRECTORS IN 10	FILE NOW:  FILE NOW:  9. Election Campaign Financing Trust Fund Contribution.  Added to Fees.  Department of State  Trust Fund Contribution.  CHATRMAN: FEATURE:  WARD, REV. PATRICK J.  SIRET ADDRESS GITY-S1-ZIP  TILE  WARNER, JUDITH  AME WARNER, JUDITH  AME WARNER, JUDITH  G139 EDGEWATER DR  UNEDIN FL 34698  TILE  WARNER, JUDITH  AME WARNER, JUDITH  G39 EDGEWATER DR  UNEDIN FL 34698  TILE  WARNER, JUDITH  G39 EDGEWATER DR  UNEDIN FL 34698  TILE  WARNER, JUDITH  G39 EDGEWATER DR  UNEDIN FL 34698  TILE  WARNER, JUDITH  G39 EDGEWATER DR  UNEDIN FL 34698  TILE  WARNER, JUDITH  G39 EDGEWATER DR  UNEDIN FL 34698  TILE  WARNER, JUDITH  G39 EDGEWATER DR  UNEDIN FL 34698  TILE  WARNER, JUDITH  G39 EDGEWATER DR  UNEDIN FL 34698  TILE  CROOK, THOMAS M.  Delete  TILE  CROOK, THOMAS M.  Addition  CROOK, THOMAS M.	FILE NOW:  9. Election Campaign Financing FEE-16-\$61:25  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE NAME STREET ADDRESS CITY-ST-ZPP  TITLE WARNER, JUDITH MAME WARNER, JUDITH MAME STREET ADDRESS CITY-ST-ZPP  TITLE WARNER, JUDITH MAME WARNER, JUDITH MAME STREET ADDRESS CITY-ST-ZPP  TITLE WARNER, JUDITH STREET ADDRESS CITY-ST-ZPP  STREET ADDRESS	FILE NOW:  9. Election Campaign Financing Trust Eund Contribution.  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE NAME WARD, REV. PATRICK J SIRET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE WARNER, JUDITH STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE WARNER, JUDITH STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE WARNER, JUDITH STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT Delete TITLE STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT Delete TITLE STREET ADDRESS CITY-ST-ZIP  TITLE VICE PRESIDENT Delete TITLE STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  CITY-ST-ZIP DUNEDIN FL 34698  TITLE CHARGE TO OFFICERS AND DIRECTORS IN 10  CHARGE Added to Fees  Added to Fees  DAMAE CHECK Payable to  Added to Fees  DEPARTMENT of State  CHARGES TO OFFICERS AND DIRECTORS IN 10  CHARGES TO OFFICERS AND DIRECTORS IN 1	FILE NOW:  9. Election Campaign Financing Trust Eund Contribution.  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE NAME WARD, REV. PATRICK J SIRET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE WARNER, JUDITH STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE WARNER, JUDITH STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE WARNER, JUDITH STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT Delete TITLE STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT Delete TITLE STREET ADDRESS CITY-ST-ZIP  TITLE VICE PRESIDENT Delete TITLE STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  CITY-ST-ZIP DUNEDIN FL 34698  TITLE CHARGE TO OFFICERS AND DIRECTORS IN 10  CHARGE Added to Fees  Added to Fees  DAMAE CHECK Payable to  Added to Fees  DEPARTMENT of State  CHARGES TO OFFICERS AND DIRECTORS IN 10  CHARGES TO OFFICERS AND DIRECTORS IN 1	FILE NOW:  9. Election Campaign Financing Trust Eund Contribution.  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE NAME WARD, REV. PATRICK J SIRET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE WARNER, JUDITH STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE WARNER, JUDITH STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE WARNER, JUDITH STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT Delete TITLE STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT Delete TITLE STREET ADDRESS CITY-ST-ZIP  TITLE VICE PRESIDENT Delete TITLE STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  CITY-ST-ZIP DUNEDIN FL 34698  TITLE CHARGE TO OFFICERS AND DIRECTORS IN 10  CHARGE Added to Fees  Added to Fees  DAMAE CHECK Payable to  Added to Fees  DEPARTMENT of State  CHARGES TO OFFICERS AND DIRECTORS IN 10  CHARGES TO OFFICERS AND DIRECTORS IN 1	FILE NOW:  9. Election Campaign Financing FEE-16-\$61:25  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE NAME STREET ADDRESS CITY-ST-ZPP  TITLE WARNER, JUDITH MAME WARNER, JUDITH MAME STREET ADDRESS CITY-ST-ZPP  TITLE WARNER, JUDITH MAME WARNER, JUDITH MAME STREET ADDRESS CITY-ST-ZPP  TITLE WARNER, JUDITH STREET ADDRESS CITY-ST-ZPP  STREET ADDRESS	FILE NOW:  9. Election Campaign Financing FEE-IS-\$61:25  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE WARNER, JUDITH STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE NAME STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT Delete DUNEDIN FL 34698  TITLE NAME STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE CROOK, THOMAS M STREET ADDRESS STREET ADDRESS CITY-ST-ZIP STREET	FILE NOW:  FILE NOW:  9. Election Campaign Financing Trust Fund Contribution.  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE WARD, REV. PATRICK J NAME SIRETADORESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE NAME WARNER, JUDITH 639 EDGEWATER DR DUNEDIN FL 34698  TITLE NAME STREET ADDRESS CITY-ST-ZIP UNEDIN FL 34698  TITLE CROOK, THOMAS M, Addition CROOK, THOMAS M, Addition CROOK, THOMAS M, Addition CATE STREET ADDRESS CITY-ST-ZIP UNEDIN FL 34698  TITLE CROOK, THOMAS M, Addition CROOK, THOMAS M, Addition CROOK, THOMAS M, Addition CATE STREET ADDRESS CITY-ST-ZIP CROOK, THOMAS M, Addition CROOK, THOMAS M, Addition CATE STREET ADDRESS CITY-ST-ZIP CROOK, THOMAS M, Addition CATE STREET ADDRESS CITY-ST-ZIP CROOK, THOMAS M, Addition CATE STREET ADDRESS CITY-ST-ZIP CROOK, Addition CATE STREET ADDRESS CITY-ST-ZIP CROOK, Addition CATE CATE CATE CATE CATE CATE CATE CATE	FILE NOW:  9. Election Campaign Financing Trust Fund Contribution.  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE WARD, REV. PATRICK J.  STREET ADDRESS CITY-S1-ZIP DUNED IN FL. 34698  TITLE WARNER, JUDITH STREET ADDRESS CITY-S1-ZIP DUNED IN FL. 34698  TITLE VICE PRESIDENT  TITLE  NAME STREET ADDRESS CITY-S1-ZIP DUNED IN FL. 34698  TITLE  NAME STREET ADDRESS CITY-S1-ZIP DUNED IN FL. 34698  TITLE  NAME STREET ADDRESS CITY-S1-ZIP DUNED IN FL. 34698  TITLE  OCHAIRMAN  TREET ADDRESS CITY-S1-ZIP DUNED IN FL. 34698  TITLE  OCHAIRMAN  TREET ADDRESS CITY-S1-ZIP DUNED IN FL. 34698  TITLE  OCHAIRMAN  TREET ADDRESS CITY-S1-ZIP DUNED IN FL. 34698  TITLE  OCHAIRMAN  TREET ADDRESS CITY-S1-ZIP DUNED IN FL. 34698  TITLE  OCHAIRMAN  TREET ADDRESS CITY-S1-ZIP DUNED IN FL. 34698  TITLE  OCHAIRMAN  TREET ADDRESS CITY-S1-ZIP  OCHAIRMAN		•		•	<b>2</b>			
Signature. Typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  FILE NOW:  9. Election Campaign Financing \$5.00 May Be Added to Fees  Trust Fund Contribution. Added to Fees  Department of State	Make Check Payable to Department of State  INS/CHANGES TO OFFICERS AND DIRECTORS IN 10	FILE NOW:  FILE NOW:  9. Election Campaign Financing Trust Fund Contribution.  Added to Fees.  Department of State  Trust Fund Contribution.  CHATRMAN: FEATURE:  WARD, REV. PATRICK J.  SIRET ADDRESS GITY-S1-ZIP  TILE  WARNER, JUDITH  AME WARNER, JUDITH  AME WARNER, JUDITH  G139 EDGEWATER DR UNEDIN FL 34698  TILE  WARNER, JUDITH  AME WARNER, JUDITH  G39 EDGEWATER DR UNEDIN FL 34698  TILE  WARNER, JUDITH  G39 EDGEWATER DR UNEDIN FL 34698  TILE  WARNER, JUDITH  G39 EDGEWATER DR UNEDIN FL 34698  TILE  WARNER, JUDITH  G39 EDGEWATER DR UNEDIN FL 34698  TILE  WARNER, JUDITH  G39 EDGEWATER DR UNEDIN FL 34698  TILE  WARNER, JUDITH  G39 EDGEWATER DR UNEDIN FL 34698  TILE  WARNER, JUDITH  G39 EDGEWATER DR UNEDIN FL 34698  TILE  CROOK, THOMAS M.  Delete  TILE  CROOK, THOMAS M.  Addition  CROOK, THOMAS M.	FILE NOW:  9. Election Campaign Financing FEE-16-\$61:25  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE NAME STREET ADDRESS CITY-ST-ZPP  TITLE WARNER, JUDITH MAME WARNER, JUDITH MAME STREET ADDRESS CITY-ST-ZPP  TITLE WARNER, JUDITH MAME WARNER, JUDITH MAME STREET ADDRESS CITY-ST-ZPP  TITLE WARNER, JUDITH STREET ADDRESS CITY-ST-ZPP  STREET ADDRESS	FILE NOW:  9. Election Campaign Financing Trust Eund Contribution.  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE NAME WARD, REV. PATRICK J SIRET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE WARNER, JUDITH STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE WARNER, JUDITH STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE WARNER, JUDITH CROCK, THOMAS M DUNEDIN FL 34698  TITLE WARNER, JUDITH STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT Delete TITLE STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT Delete TITLE STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT Delete TITLE STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT Delete TITLE STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE CROOK, THOMAS M STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  CITY-ST-ZIP DUNEDIN FL 34698  CITY-ST-ZIP CROOK, THOMAS M STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  CITY-ST-ZIP CITY-ST-Z	FILE NOW:  9. Election Campaign Financing Trust Eund Contribution.  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE NAME WARD, REV. PATRICK J SIRET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE WARNER, JUDITH STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE WARNER, JUDITH STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE WARNER, JUDITH CROCK, THOMAS M DUNEDIN FL 34698  TITLE WARNER, JUDITH STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT Delete TITLE STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT Delete TITLE STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT Delete TITLE STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT Delete TITLE STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE CROOK, THOMAS M STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  CITY-ST-ZIP DUNEDIN FL 34698  CITY-ST-ZIP CROOK, THOMAS M STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  CITY-ST-ZIP CITY-ST-Z	FILE NOW:  9. Election Campaign Financing Trust Eund Contribution.  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE NAME WARD, REV. PATRICK J SIRET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE WARNER, JUDITH STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE WARNER, JUDITH STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE WARNER, JUDITH CROCK, THOMAS M DUNEDIN FL 34698  TITLE WARNER, JUDITH STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT Delete TITLE STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT Delete TITLE STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT Delete TITLE STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT Delete TITLE STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE CROOK, THOMAS M STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  CITY-ST-ZIP DUNEDIN FL 34698  CITY-ST-ZIP CROOK, THOMAS M STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  CITY-ST-ZIP CITY-ST-Z	FILE NOW:  9. Election Campaign Financing FEE-16-\$61:25  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE NAME STREET ADDRESS CITY-ST-ZPP  TITLE WARNER, JUDITH MAME WARNER, JUDITH MAME STREET ADDRESS CITY-ST-ZPP  TITLE WARNER, JUDITH MAME WARNER, JUDITH MAME STREET ADDRESS CITY-ST-ZPP  TITLE WARNER, JUDITH STREET ADDRESS CITY-ST-ZPP  STREET ADDRESS	FILE NOW:  9. Election Campaign Financing FEE-IS-\$61:25  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE WARNER, JUDITH STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE WARNER, JUDITH STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE WARNER, JUDITH STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE WARNER, JUDITH STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE WARNER, JUDITH STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE WARNER, JUDITH STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE WARNER, JUDITH STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT Delete TITLE STREET ADDRESS CITY-ST-ZIP CROOK, THOMAS M STREET ADDRESS STREET A	FILE NOW:  FILE NOW:  9. Election Campaign Financing Trust Fund Contribution.  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE WARD, REV. PATRICK J NAME SIRET ADDRESS CITY-ST-ZIP UNEDIN FL 34698  TITLE NAME WARNER, JUDITH 639 EDGEWATER DR DUNEDIN FL 34698  TITLE NAME STREET ADDRESS CITY-ST-ZIP UNEDIN FL 34698  TITLE CHANGES CITY-ST-ZIP UNEDIN FL 34698  TITLE NAME STREET ADDRESS CITY-ST-ZIP UNEDIN FL 34698  TITLE CROOK, THOMAS M, Addition Change Addition	FILE NOW:  9. Election Campaign Financing Trust Fund Contribution.  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE WARD, REV. PATRICK J STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE WARNER, JUDITH STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT  TITLE VICE PRESIDENT  TITLE  Addition  NAME STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698  TITLE  Change Addition  OFFICERS AND DIRECTORS IN 10  Addition  STREET ADDRESS CITY-ST-ZIP  DUNEDIN FL 34698  TITLE  Change Addition  OFFICERS AND DIRECTORS IN 10  OFFICERS AND D	8. The abov	re named entity submits this statement for	r the purpose of changing its re	egistered office or regis	tered agent, or both, in the state of Flo			-
SIGNATURE  Signature. Typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent atgressure required when reinstating)  FILE NOW:  9. Election Campaign Financing  \$5.00 May Be  Make Check Payable to  FEE-IS-\$61:25  Trust Fund Contribution	Make Check Payable to  Department of State  INS/CHANGES TO OFFICERS AND DIRECTORS IN 10	FILE NOW:    Signature. typod or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating)   DATE	SIGNATURE    Signature, typed or printed name of regressed agent and title if applicable. (NOTE Registered Agent algorature required when reinstating)   DATE	SIGNATURE    Signature typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent applica	SIGNATURE    Signature typed or printed name of registered agent and time if applicable   (NOTE: Registered Agent applicab	SIGNATURE    Signature typed or printed name of registered agent and time if applicable   (NOTE: Registered Agent applicab	SIGNATURE    Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent algorature required when rainstating)   DATE	SIGNATURE    Signature, Vood or printed name of ingressed agent and title if applicable.   (NOTE: Registered Agent applicable.   (NOTE: Registered	SIGNATURE    Signature. Viced or priviled name of registered agent and title # applicable   (NOTE: Registered Agent signature required when reinstating)   DATE	SIGNATURE    Signature Typed or printed name of registered agent and the if applicable   (NOTE Registered Agent algorithm registe				City		FL Zip C	Code	4
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature. Typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent atgrature required when reinstating)  PILE NOW:  9. Election Campaign Financing  \$5.00 May Be  Make Check Payable to  Trust Fund Contribution. Added to Fees  Department of State	Make Check Payable to  Department of State  INS/CHANGES TO OFFICERS AND DIRECTORS IN 10	City   FL   Zip Code    3. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE   Signature, typed or printed name of registered agent and titls a applicable   (NOTE registered Agent agreed when recirstance)   OATE      FILE NOW:   9. Election Campaign Financing   \$5.00 May Be   Make Check Payable to	8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature flood or printed name of registered agent and title is applicable (NOTE Registered Agent signature registered agent, or both, in the state of Florida.  SIGNATURE  FILE NOW:  9. Election Campaign Financing Trust Fund Contribution.	8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature. Typed or private name of registered agent and the is applicable.  FILE NOW:  9. Election Campaign Financing  \$5.00 May Be Added to Fees.  Make Check Payable to- Department-of-State.  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE  WARD, REV. PATRICK J  639 EDGEWATER DR  DUNEDIN FL 34698  TITLE  WARNER, JUDITH  WARNER, JUD	8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature. Typed or private name of registered agent and the is applicable.  FILE NOW:  9. Election Campaign Financing  \$5.00 May Be Added to Fees.  Make Check Payable to- Department-of-State.  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE  WARD, REV. PATRICK J  639 EDGEWATER DR  DUNEDIN FL 34698  TITLE  WARNER, JUDITH  WARNER, JUD	8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature. Typed or private name of registered agent and the is applicable.  FILE NOW:  9. Election Campaign Financing  \$5.00 May Be Added to Fees.  Make Check Payable to- Department-of-State.  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE  WARD, REV. PATRICK J  639 EDGEWATER DR  DUNEDIN FL 34698  TITLE  WARNER, JUDITH  WARNER, JUD	8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature flood or printed name of registered agent and title is applicable (NOTE Registered Agent signature registered agent, or both, in the state of Florida.  SIGNATURE  FILE NOW:  9. Election Campaign Financing Trust Fund Contribution.	8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature typed or printed name of registered agent and time is applicable (NOTE Registered Agent algorator registered agent, or both, in the state of Florida.  FILE NOW:  9. Election Campaign Financing Trust Fund Contribution.	8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE	8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE    Signature Typed or printed name of registered agent and title # applicable   (NOTE: Registered Agent agentary required when reintrating)   OATE	3636 F	ISHER ROAD		Street Addres	s (P.O. Box Number is Not Acceptable	∍} 	<del>_</del>	$\dashv$
3636 FISHER ROAD PALM HARBOR FL 34683  City  FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature. Typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent atgrature required when reinstating)  OATE  FILE NOW:  9. Election Campaign Financing FEE-IS-\$61:25  Added to Fees  Department of State	FL Zip Code  If, or both, in the state of Florida.  Be Make Check Payable to Department of State  INS/CHANGES TO OFFICERS AND DIRECTORS IN 10	3636 FISHER ROAD PALM HARBOR FL 34683  City FL Zip Code  3. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature, 1,000 or printed name of registered agent and title # applicable (NOTE: Registered Agent signature required when reinstation)  PILE NOW:  FILE NOW:  9. Election Campaign Financing Added to Feee Department of State  Trust Fund Contribution.  Delete Trust Fund Contribution.  Trust Fund Contribution.  Added to Feee Department of State  CHATRIANI: TECATION: Delete Trust Registered Agent signature required when reinstation)  OC.  OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TREET ADDRESS  OCHATRIANI: TECATION: Delete Trust Registered Agent signature required when reinstation)  OCHATRIANI: TECATION: Delete Trust Registered Agent signature required when reinstation)  OCHATRIANI: TECATION: Delete Trust Registered Agent signature required when reinstation)  OCHATRIANI: TECATION: Delete Trust Registered Agent signature required when reinstation)  OCHATRIANI: TECATION: Delete Trust Registered agent, or both, in the state of Florida.  Added to Feee Department of State  Departme	3636 FISHER ROAD PALM HARBOR FL 34683  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature, trosed or privated name of registered agent and the # applicable (NOTE: Registered Agent algorature required when reinstating)  DATE  FILE NOW:  9. Election Campaign Financing \$5.00 May Be Added to Fees Department of State  10. OFFICERS AND DIRECTORS 111. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE WARD, REV. PATRICK J Delete NAME SIREET ADDRESS CITY-SI-ZIP  TITLE WARD, REV. PATRICK J Delete NAME SIREET ADDRESS CITY-SI-ZIP  TITLE WARNER, JUDITH SIREET ADDRESS CITY-SI-ZIP  WARNER, JUDITH OPERS DR CITY-SI-ZIP  UTCE PRESIDENT Delete NAME SIREET ADDRESS CITY-SI-ZIP  TITLE WARNER, JUDITH SIREET ADDRESS CITY-SI-ZIP  UTCE PRESIDENT Delete NAME SIREET ADDRESS CITY-SI-ZIP  CROOK, THOMAS M. SIREET ADDRESS  639 EDGEWATER DR DRESS DELEWATER DR SIREET ADDRESS  GROWN, THOMAS M. SIREET ADDRESS  SIREET ADDRESS  639 EDGEWATER DR SIREET ADDRESS  SIREET ADDRESS  639 EDGEWATER DR SIREET ADDRESS  SIREET ADDRESS	3636 FISHER ROAD PALM HARBOR FL 34683  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature trood or printed range of registered agent and title a applicable (NOTE Registered Agent asynature registered agent, or both, in the state of Florida.  SIGNATURE  FILE NOW:  FILE NOW:  FEE-IS-\$81:25  OFFICERS AND DIRECTORS  If use fund Contribution.  OFFICERS AND DIRECTORS  If use fund Contribution.  Added to Foos.  Department of State  Department of State  OFFICERS AND DIRECTORS IN 10  TITLE  WARD, REV. PATRICK J  639 EDGEWATER DR  GUY-SI-ZIP  WARNER, JUDITH  639 EDGEWATER DR  GUY-SI-ZIP  Obelet  TITLE  WARNER, JUDITH  639 EDGEWATER DR  GUY-SI-ZIP  Obelet  TITLE  VICE PRESIDENT  Obelet  TITLE  VICE PRESIDENT  OBelet  TITLE  NAME  SIREET ADDRESS  GUY-SI-ZIP  Obelet  TITLE  NAME  SIREET ADDRESS  GUY-SI-ZIP  Obelet  TITLE  OCHAIRMAN  OCHA	3636 FISHER ROAD PALM HARBOR FL 34683  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature trood or printed range of registered agent and title a applicable (NOTE Registered Agent asynature registered agent, or both, in the state of Florida.  SIGNATURE  FILE NOW:  FILE NOW:  FEE-IS-\$81:25  OFFICERS AND DIRECTORS  If use fund Contribution.  OFFICERS AND DIRECTORS  If use fund Contribution.  Added to Foos.  Department of State  Department of State  OFFICERS AND DIRECTORS IN 10  TITLE  WARD, REV. PATRICK J  639 EDGEWATER DR  GUY-SI-ZIP  WARNER, JUDITH  639 EDGEWATER DR  GUY-SI-ZIP  Obelet  TITLE  WARNER, JUDITH  639 EDGEWATER DR  GUY-SI-ZIP  Obelet  TITLE  VICE PRESIDENT  Obelet  TITLE  VICE PRESIDENT  OBelet  TITLE  NAME  SIREET ADDRESS  GUY-SI-ZIP  Obelet  TITLE  NAME  SIREET ADDRESS  GUY-SI-ZIP  Obelet  TITLE  OCHAIRMAN  OCHA	3636 FISHER ROAD PALM HARBOR FL 34683  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature trood or printed range of registered agent and the elapticuble (NOTE Registered Agent agreement registered agent, or both, in the state of Florida.  SIGNATURE  FILE NOW:  FILE NOW:  FEE-IS-\$81:25  OFFICERS AND DIRECTORS  If use Fund Contribution.  OFFICERS AND DIRECTORS  If use Fund Contribution.  Added to Foos.  Department of State  Department of State  TITLE  WARD, REV. PATRICK J  639 EDGEWATER DR  GUIY-SI-ZIP  TITLE  WARNER, JUDITH  639 EDGEWATER DR  GUIY-SI-ZIP  VICE PRESIDENT  ORION, THOMAS M;  SIREET ADDRESS  GIY-SI-ZIP  ORION, SIREET ADDRESS  GIY-SI-ZIP  ORION, THOMAS M;  SIREET ADDRESS  GIY-SI-ZIP  ORION, THOMAS M;  SIREET ADDRESS  GIY-SI-ZIP  ORION, THOMAS M;  SIREET ADDRESS  GIY-SI-ZIP  ORION, SIREET ADDRESS  GIY-SI-ZIP  ORION, SIREET ADDRESS  GIY-SI-ZIP  ORION, SIREET ADDRESS  GIY-SI-ZIP  ORION SIREET ADDRESS  GIY-SI-ZIP  ORION SIREET ADDRESS  GIY-SI-ZIP  ORION SIREET ADDRESS  GIY-SI-ZIP	3636 FISHER ROAD PALM HARBOR FL 34683  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature, trosed or privated name of registered agent and the # applicable (NOTE: Registered Agent algorature required when reinstating)  DATE  FILE NOW:  9. Election Campaign Financing \$5.00 May Be Added to Fees Department of State  10. OFFICERS AND DIRECTORS 111. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE WARD, REV. PATRICK J Delete NAME SIREET ADDRESS CITY-SI-ZIP  TITLE WARD, REV. PATRICK J Delete NAME SIREET ADDRESS CITY-SI-ZIP  TITLE WARNER, JUDITH SIREET ADDRESS CITY-SI-ZIP  WARNER, JUDITH OPERS DR CITY-SI-ZIP  UTCE PRESIDENT Delete NAME SIREET ADDRESS CITY-SI-ZIP  TITLE WARNER, JUDITH SIREET ADDRESS CITY-SI-ZIP  UTCE PRESIDENT Delete NAME SIREET ADDRESS CITY-SI-ZIP  CROOK, THOMAS M. SIREET ADDRESS  639 EDGEWATER DR DRESS DELEWATER DR SIREET ADDRESS  GROWN, THOMAS M. SIREET ADDRESS  SIREET ADDRESS  639 EDGEWATER DR SIREET ADDRESS  SIREET ADDRESS  639 EDGEWATER DR SIREET ADDRESS  SIREET ADDRESS	3636 FISHER ROAD PALM HARBOR FL 34683  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature from or printed name of registered spear and title if applicable (NOTE Registered Agent algreene sequend when reintrating)  PALE NOW:  9. Election Campaign Financing \$5.00 May Be Added to Fees Department of State  10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE CHATRMANI FERTILIC: Delete NAME WARD, REV. PATRICK J 639 EDGEWATER DR DINEDIN FL 34698  TITLE NAME WARNER, JUDITH WARNER, JUDITH WARNER, JUDITH WARNER, JUDITH WARNER, JUDITH STREET ADDRESS CITY-SI-ZIP DUNEDIN FL 34698  TITLE VICE PRESIDENT Delete NAME STREET ADDRESS CITY-SI-ZIP CROOK, THOMAS M CROOK, THOMAS M STREET ADDRESS 639 EDGEWATER DR CROOK, THOMAS M STREET ADDRESS 639 EDGEWATER DR STREET ADDRESS	3636 FISHER ROAD PALM HARBOR FL 34683  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature. Typed or printed name of registered agent and the inapplicable. (NOTE Registered Agent algorators required when reinstating)  PILE NOW:  9. Election Campaign Financing \$5.00 May Be Added to Foos  Department of State  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE NAME WARD, REV. PATRICK J STRET ADDRESS 639 EDGEWATER DR UNEDIN FL 34698  TITLE NAME WARNER, JUDITH STRET ADDRESS GIV-SI-ZIP  WARNER, JUDITH STRET ADDRESS GIV-SI-ZIP  WARNER, JUDITH STRET ADDRESS GIV-SI-ZIP  UNDEDIN FL 34698  TITLE WARD STRET ADDRESS GIVE SI-ZIP  UNDEDIN FL 34698  TITLE WARD STRET ADDRESS GIVE SI-ZIP  UNDEDIN FL 34698  TITLE WARD STRET ADDRESS GIVE SI-ZIP  UNDEDIN FL 34698  TITLE WARD STRET ADDRESS GIVE SI-ZIP  UNDEDIN FL 34698  TITLE WARD STRET ADDRESS GIVE SI-ZIP  UNDEDIN FL 34698  TITLE WARD STRET ADDRESS GIVE SI-ZIP  UNDEDIN FL 34698  TITLE WARD STRET ADDRESS GIVE SI-ZIP  UNDEDIN FL 34698  TITLE WARD STRET ADDRESS GIVE SI-ZIP  UNDEDIN FL 34698  TITLE W	3636 FISHER ROAD PALM HARBOR FL 34683  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature from the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  FILE NOW:  9. Election Campaign Financing Trust Fund Contribution. Added to Fees.  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE WARD, REV. PATRICK J 639 EDGEWATER DR GINERIADORESS CITY-ST-ZIP TITLE WARNER, JUDITH 639 EDGEWATER DR UNEDIN FL 34698  TITLE WARNER, JUDITH 639 EDGEWATER DR UNEDIN FL 34698  TITLE WARNER, JUDITH 639 EDGEWATER DR DUNEDIN FL 34698  TITLE WARNER, JUDITH 639 EDGEWATER DR DUNEDIN FL 34698  TITLE UND Change Addition  OFFICERS AND DIRECTORS IN 10  Change Addition	FREEBO	<u> </u>	Kalistan Walit					
FREEBORN, JOHN B 3636 FISHER ROAD PALM HARBOR FL 34683  City  FL  Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature typed or pirried name of registered agent and title if applicable. (NOTE: Registered Agent atgrature required when reinstating)  OATE  FILE NOW:  9. Election Campaign Financing \$5.00 May Be Added to Fees  Department of State	FL Zip Code  It, or both, in the state of Florida.  Make Check Payable to  Department of State  INS/CHANGES TO OFFICERS AND DIRECTORS IN 10	FREEBORN, JOHN B 3636 FISHER ROAD PALM HARBOR FL 34683  City FL Zip Code  5. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature, Typed or printed name of registered agent and title if applicable (INOTE: Registered Agent spynature required when rentristancy)  PEE-IS-\$61.25	FREEBORN, JOHN B 3636 FISHER ROAD PALM HARBOR FL 34683  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florids.  SIGNATURE  FILE NOW:  9. Election Campaign Financing FEE-IS-\$61.26  10. OFFICERS AND DIRECTORS  ITUSE Fund Contribution. Added to Fees Department of State  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE WARD, REV. PATRICK J AGGION WARD, REV. PATRICK J AGGION WARD, REV. PATRICK J SIREFADORES CITY-ST-ZIP UNDED IN FL 34698  TITLE WARRER, JUDITH WARRER	FREEBORN, JOHN B 3636 FISHER ROAD PALM HARBOR FL 34683  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature Toda or private name of registered agent and the ** Applicable*  PEE-18-\$61:26  Titust Fund Contribution.	FREEBORN, JOHN B 3636 FISHER ROAD PALM HARBOR FL 34683  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature Toda or private name of registered agent and the ** Applicable*  PEE-18-\$61:26  Titust Fund Contribution.	FREEBORN, JOHN B 3636 FISHER ROAD PALM HARBOR FL 34683  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signama froed or private name of registered agent and the registered agent age	FREEBORN, JOHN B 3636 FISHER ROAD PALM HARBOR FL 34683  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florids.  SIGNATURE  FILE NOW:  9. Election Campaign Financing FEE-IS-\$61.26  10. OFFICERS AND DIRECTORS  ITUSE Fund Contribution. Added to Fees Department of State  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE WARD, REV. PATRICK J AGGION WARD, REV. PATRICK J AGGION WARD, REV. PATRICK J SIREFADORES CITY-ST-ZIP UNDED IN FL 34698  TITLE WARRER, JUDITH WARRER	FREEBORN, JOHN B 3636 FISHER ROAD PALM HARBOR FL 34683  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Fkorida.  SIGNATURE  Signature froad or prised name of registered agent and the is applicable (NOTE registered Agent agreement Agen	FREEBORN, JOHN B 3636 FISHER ROAD PALM HARBOR FL 34683  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature typed or private name of registered agent and this a applicable.  (NOTE Registered Agent agent and agent and this a applicable.  (NOTE Registered Agent agent and agent and this a applicable.  (NOTE Registered Agent agent and agent and this a policiable.  (NOTE Registered Agent agent and agent and this a policiable.  (NOTE Registered Agent agent agent agent and this a policiable.  (NOTE Registered agent, or both, in the state of Florida.  DATE  FILE NOTH:  Signature typed or private name of registered agent, or both, in the state of Florida.  DATE  FILE NOTH:  Signature typed or private name of registered agent, or both, in the state of Florida.  Added to Florida.  DATE  FILE NOTH:  Signature typed or private name of registered agent, or both, in the state of Florida.  DATE  FILE NOTH:  Signature typed or private name of registered agent, or both, in the state of Florida.  DATE  FILE NOTH:  Signature typed or private name of registered agent, or both, in the state of Florida.  DATE  FILE NOTH:  Signature typed or private name of registered agent, or both, in the state of Florida.  DATE  FILE NOTH:  Signature typed or private name of registered agent, or both, in the state of Florida.  DATE  FILE NOTH:  Signature typed or private name of registered agent, or both, in the state of Florida.  DATE  FILE NOTH:  Signature typed or private name of registered agent, or both, in the state of Florida.  DATE  FILE NOTH:  Signature typed or private name of registered agent, or both, in the state of Florida.  DATE  FILE NOTH:  Signature typed or private name of registered agent and the registered office or registered agent, or both, in the state of Florida.  Added to Foos.  Department of State  FILE NOTH  Signature t	FREEBORN, JOHN B 3636 FISHER ROAD PALM HARBOR FL 34683  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature from or privated name of ingressed agent and 1986 a applicable. (NOTE: Registered Agent algorable incompanies of the purpose of changing its registered office or registered agent, or both, in the state of Florida.  FILE NOW:  9. Election Campaign Financing \$5.00 May Be Added to Fees Department of State  10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  10. CHATRMAN: FLEATIC: Delete TITLE MAME SIRRET ADDRESS 639 EDGEWATER DR 649 EDGEWATER DR 650 EDGEWA		6. Name and Address of Current	Registered Agent		<u></u>	Fee Req		$\dashv$
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name  FREEBORN, JOHN B 3636 FISHER ROAD PALM HARBOR FL 34683  City  FL  Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature Typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating)  DATE  FILE NOW:  9. Election Campaign Financing Trust Fund Contribution.  Added to Fees.  Department of State	Ime and Address of New Registered Agent  ( Number is Not Acceptable)  FL Zip Code  If, or both, in the state of Florida.  Make Check Payable to Department of State  INS/CHANGES TO OFFICERS AND DIRECTORS IN 10	6. Name and Address of Current Registered Agent  7. Name and Address of New Registered Agent  FREBORN, JOHN B 3636 FISHER ROAD  PALM HARBOR FL 34683  City FL Zip Code  6. Name and Address of New Registered Agent  Name  Sireel Address (P.O. Box Number is Not Acceptable)  City FL Zip Code  6. Name and Address of New Registered Agent  Name  Sireel Address (P.O. Box Number is Not Acceptable)  City FL Zip Code  6. Name and Address of New Registered Agent  Name  Sireel Address (P.O. Box Number is Not Acceptable)  City FL Zip Code  FL Zip Code  6. Name and Address of New Registered Agent  Name  Sireel Address (P.O. Box Number is Not Acceptable)  City FL Zip Code  City FL Zip Code  6. Name and Address of New Registered Agent  Name is Not Acceptable)  City FL Zip Code  City FL Zip Code  Address of New Registered Agent  Name is Not Acceptable)  City FL Zip Code  Address of New Registered Agent  Not Acceptable)  City FL Zip Code  City FL Zip Code  Address of New Registered Agent  Not Acceptable)  City FL Zip Code  City FL Zip Code  Address of New Registered Agent  Not Acceptable)  City FL Zip Code  City FL Zip Code  Address of New Registered Agent  Not Acceptable)  City FL Zip Code  City FL Zip Code  Address of New Registered Agent  Not Acceptable)  City FL Zip Code  Address of New Registered Agent  Not Acceptable)  City FL Zip Code  Address of New Registered Agent  Not Acceptable)  City FL Zip Code  City FL Zip Code  Address of New Registered Agent  Not Acceptable)  City FL Zip Code  City FL Zip Code  Address of New Registered Agent  Not Acceptable)  City FL Zip Code  City FL Zip Code  Code  Code  City FL Zip Code  Code  Charles And Acceptable)  CATE  Address of New Registered Agent  Not Acceptable)  City FL Zip Code  Code  Code  City FL Zip Code  Code  Charles And Acceptable)  Code  Charles And Acceptable  Code  Code  Code  Charles And Acceptable  Code  Charles And Acceptable  Code  Code  Code  Code  Code  Code  C	6. Name and Address of Current Registered Agent  7. Name and Address of New Registered Agent  FREEBORN, JOHN B 3636 FISHER ROAD  PALM HARBOR FL 34683  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  SIGNATURE  FILE NOW:  9. Election Campaign Financing FILE NOW:  FEE 16.461.25  FILE NOW:  9. Election Campaign Financing FILE NOW:  FEE 16.461.25  FOR Make Check Payable to Department of State  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  THE WARD, REV. PATRICK J  639 EDCEWATER DR  CITY-SI-ZP  UNED IN FL 34698  THE WARRER, JUDITH  NAME WARRER, JUDITH  CROOK, THOMAS M.  SIRETADORESS  GAS EDGEWATER DR  CITY-SI-ZP  CITY-SI-Z	6. Name and Address of Current Registered Agent  7. Name and Address of New Registered Agent  7. Name and Address of New Registered Agent  Name  Street Address (P.O. Box Number is Not Acceptable)  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  SUBMIT TO STREET AGENTS  FILE NOW:  9. Election Campaign Financing Trust Fund Contribution.  9. Election Campaign Financing Trust Fund Contribution.  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE WARD, REV. PATRICK J SIRET ADDRESS SIRET ADD	6. Name and Address of Current Registered Agent  7. Name and Address of New Registered Agent  7. Name and Address of New Registered Agent  Name  Street Address (P.O. Box Number is Not Acceptable)  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  SIGNATURE  SIGNATURE  FILE NOW:  9. Election Campaign Financing Trust Fund Contribution.  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE WARD, REV. PATRICK J SIRET ADDRESS CITY-SI-79  TITLE WARD, REV. PATRICK J SIRET ADDRESS CITY-SI-79  TITLE WARDEN JUDITH 639 EDGEWATER DR DUNEDIN FL 34698  TITLE WARDEN JUDITH 639 EDGEWATER DR UNEDIN FL 34698  TITLE WARDEN JUDITH CROOK, THOMAS M; SIRET ADDRESS CITY-SI-79  TITLE WARD JUDIN FL 34698  UNIVESTICATE CROOK, THOMAS M; SIRET ADDRESS CITY-SI-79  UNIVEDIN FL 34698	6. Name and Address of Current Registered Agent  7. Name and Address of New Registered Agent  Name  Street Address (P.O. Box Number is Not Acceptable)  Street Address (P.O. Box Number is Not Acceptable)  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  SIGNATURE  SIGNATURE  FILE NOW:  9. Election Campaign Financing Trust Fund Contribution.	Signature  FILE NOW:	6. Name and Address of Current Registered Agent  7. Name and Address of New Registered Agent  FREEBORN, JOHN B 3636 FISHER ROAD  PALM HARBOR FL 34683  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature Topic or privace agent and the applicable (NOTE Registered Agent agen	6. Name and Address of Current Registered Agent  7. Name and Address of New Registered Agent  FREEBORN, JOHN B 3636 FISHER ROAD PALM HARBOR FL 34683  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signame, freed or printed name of ingressed agent and title if applicable (MOTE: Registered Agent algorithm required when nainttainty)  PALE  FILE NOW:  9. Election Campaign Financing Trust Fund Contribution. Address of New Registered Agent and State of Florida.  FEE-18-\$81:28  FEE-18-\$	6. Name and Address of Current Registered Agent  7. Name and Address of New Registered Agent  FREEBORN, JOHN B 3636 FISHER ROAD PALM HARBOR FL 34683  City  FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature bodd or printed name of registered agent and the 4 applicable (NOTE Registered Agent algument required when restricting)  FEE IS \$81.26  9. Election Campaign Financing FEE IS \$81.26  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  ITILE NAME WARD, REV. PATRICK J SIRET ADDRESS GITY-SI-ZIP DUNEDIN FL 34698  TITLE  WARNER, JUDITH SIRET ADDRESS GITY-SI-ZIP  WARNER, JUDITH SIRET ADDRESS SIRET A	Zip	Country	Zip	Country		□ \$8.75	Additional	ie
Zip Country   Zip   Country   5, Certificate of Status Desired   \$8.75 Additional Fee Required   6. Name and Address of Current Registered Agent   7, Name and Address of New Registered Agent   Name   Street Address (P.O. Box Number is Not Acceptable)   Street Address (P.O. Box Number is Not Acceptable)   Street Address (P.O. Box Number is Not Acceptable)   City   FL   Zip Code    8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.    SIGNATURE   Signature, typed or privated name of registered agent and title it applicable   (NOTE: Registered Agent signature required when reintitating)   OATE    FILE NOW: 9. Election Campaign Financing   \$5.00 May Be Added to Fees   Department of State   Department of St	### Status Desired   \$8.75 Additional Fee Required   \$8.75 Add	Zip Country	Zip Country Zip Country 5, Certificate of Status Desired 58.75 Additional Fee Required  6. Name and Address of Current Registered Agent 7, Name and Address of New Registered Agent  FREEBORN, JOHN B 3636 FISHER ROAD  PALM HARROR FL 34683  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE 5grauns, hower or present agent of the expliciable (NOTE Registered Agent agents, or both, in the state of Florida.  FILE NOW: 9. Election Campaign Financing Address (P.O. Box Number is Not Acceptable)  FILE NOW: 9. Election Campaign Financing Address agents, or both, in the state of Florida.  FILE NOW: 9. Election Campaign Financing Address agents, or both, in the state of Florida.  FILE NOW: 9. Election Campaign Financing Address agents, or both, in the state of Florida.  Make Check Payable to Department of State  10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  ITHE WARD, REV. PATRICK J Gas EDGENATER DR UNED IN FL 34698  TITLE WARNER, JUDITH Gas CITY-SI-2P	Zip Country Zip Country 5, Certificate of Status Desired \$8.75 Additional Fee Required  6. Name and Address of Current Registered Agent 7, Name and Address of New Registered Agent  FREEBORN, JOHN B 3636 FISHER ROAD  PALM HARBOR FL 34683  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  FILE NOW:  9. Election Compaging Financing 55,00 May Be Added to Fees Department of State  10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE WARD, REV. PATRICK J SIRET ADDRESS CITY-ST-2P DUINEDIN FL 34698  TITLE TO Belds TITLE WARD SIRET ADDRESS CITY-ST-2P CITY-ST-2P DUINEDIN FL 34698  TITLE VICE PRESIDENT Detection Title SIRET ADDRESS CITY-ST-2P CITY-ST-2P DUINEDIN FL 34698  TITLE VICE PRESIDENT Detection Title CROOK, THOMAS M. SIRET ADDRESS CITY-ST-2P DUINEDIN FL 34698  TITLE TITLE VICE PRESIDENT Detection Title SIRET ADDRESS CITY-ST-2P SIRET ADDRESS CI	Country   Zip   Country   Status Desired   \$8.75 Additional Fee Required   \$8.75 Additional	Country   Zip   Country   Stochticate of Status Desired   \$8.75 Additional Fee Required   \$8	Zio Country Zip Country 5, Certificate of Status Desired \$8.75 Additional Fee Required  6. Name and Address of Current Registered Agent 7, Name and Address of New Registered Agent  FREEBORN, JOHN B Street Address (P.O. Box Number is Not Acceptable)  Street Address (P.O. Box Number is Not Acceptable)  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE Dignams, hower or press out and of registered agent and the suplicible (NOTE Registered Agent agreement separated Agent agreement	Zio Country Zip Country 5, Certificate of Status Desired 58.75 Additional Fee Required  6. Name and Address of Current Registered Agent 7, Name and Address of New Registered Agent  FREEBORN, JOHN B Street Address (P.O. Box Number is Not Acceptable)  Street Address (P.O. Box Number is Not Acceptable)  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE	Signature   Sign	Signature   Sign	City & Sta	ate	City & State	<u> </u>			Applied For	
City & State  City & State  City & State  City & State  4. FEI Number 59-1090703  Not Applied F Street Address of Status Desired  Street Address of Status Desired  Fee Required For Box Number is Not Acceptable)  Street Address (P.O. Box Number is Not Acceptable)  Tity FL Zip Code  Tity FL Zip Code  SIGNATURE  Signature typed or printed name of registered agent and title if applicable  NOTE: Registered Agent signature required when reintreamy)  OATE  FILE NOW:  9. Election Campaign Financing Trust Fund Contribution.  Added to Fees  Department of State	Applied For Not Applied For Not Applied For Not Applicable stifficate of Status Desired \$8.75 Additional Fee Required Imme and Address of New Registered Agent (Number is Not Acceptable)  FL Zip Code  It, or both, in the state of Florida.  Make Check Payable to Department of State  INS/CHANGES TO OFFICERS AND DIRECTORS IN 10	City & State  Country  Country  Country  Country  S. Certificate of Status Desired  \$8.75 Additional Fee Required  \$8.75 Additional Fee Required  FREEBORN, JOHN B  3636 FISHER ROAD  PALM HARBOR FL 34683  City  FL Zip Code  City  FL Z	City & State  Country  City  City  FL  City  City  FL  City  FL  City  Ci	City & State  Country  Country  Country  S. Certificate of Status Desired  S4.75 Additional  Fee Required  Free EBORN, JOHN B  3636 FISHER ROAD  PALM HARBOR FL 34683  City  Street Address (PO. Box Number is Not Acceptable)  Street Address (PO. Box Number is Not Acceptable)  Street Address (PO. Box Number is Not Acceptable)  Signature	City & State  Country  Country  Country  S. Certificate of Status Desired  Set Reducted  For Reducte	City & State  Country  Country  Country  S. Certificate of Status Desired  Set Reducted  For Reducte	City & State  Country  Country  Country  Country  S. Certificate of Status Desired  S8.75 Additional Fee Required  S. Name and Address of Current Registered Agent  T. Name and Address of New Registered Agent  FREEBORN, JOHN B  3636 FI SHER ROAD  PALM HARBOR FL 34683  City  FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature Tell Now:  9. Election Campaign Financing  Frust Fund Contribution.  9. Election Campaign Financing  Frust Fund Contribution.  Added to Fees  Department of State  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  CHATRAMN* TREATIC.  Delete  WARD, REV. PATRICK J  639 EDGEWATER DR  UNDED IN FL 34698  TITLE  WARNER, JUDITH  Gas EDGEWATER DR  UNDED IN FL 34698  UNDE	City & State  Country  Country  Country  Country  Country  S. Certificate of Status Desired  S8.75 Additional Fee Required  S8.75 Additional Fee Required  S8.75 Additional Fee Required  Steet Address of New Registered Agent  Name  FREEBORN, JOHN B  3636 FISHER ROAD  PALM HARBOR FL 34683  City  FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Sputhors hyped or prised raine of ingreewed agent and the speciable in the special form of the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Sputhors hyped or prised raine of ingreewed agent and the speciable in the special form spin and required agent, or both, in the state of Florida.  SIGNATURE  Sputhors hyped or prised raine of ingreewed agent and the speciable in the special form spin and required agent, or both, in the state of Florida.  SIGNATURE  Sputhors hyped or prised raine of ingreewed agent and the speciable in the special form spin and required agent, or both, in the state of Florida.  SIGNATURE  Sputhors hyped or prised raine of ingreewed agent and the speciable in the special form spin and required agent, or both, in the state of Florida.  SIGNATURE  Sputhors hyped or prised raine of ingreewed agent and the special form spin and required agent, or both, in the state of Florida.  SIGNATURE  Sputhors hyped or prised raine of ingreewed agent ag	City & State  Country  Country  Country  Country  See Country  Se	City & State  Country  Country  Country  Country  So Cou					DO NOT WRI	TE IN THIS SPACE		
Suite, Apt. #, etc.  Suite, Apt. #, etc.  DO NOT WRITE IN THIS SPACE  City & State  Country  Solutional Fee Required Fee Required Fee Required Fee Required Fee Required Fee Required  To Name and Address of New Registered Agent  Name  FREEBORN, JOHN B  3636 FISHER ROAD PALM HARBOR FL 34683  City  FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florids.  SIGNATURE  Signature, typed or prised name of registered agent and the if applicable  9. Election Campaign Financing File NOW:  Trust Fund Contribution.  Added to Fees  Department of State	Applied For Not Applied For Not Applied For Not Applicable stifficate of Status Desired \$8.75 Additional Fee Required Imme and Address of New Registered Agent (Number is Not Acceptable)  FL Zip Code  It, or both, in the state of Florida.  Make Check Payable to Department of State  INS/CHANGES TO OFFICERS AND DIRECTORS IN 10	Sufie, Api. #, etc.    City & State   Security	Suite, Apt. 6, etc.    Suite, Apt. 6, etc.   Suite, Apt. 6, etc.   DO NOT WRITE IN THIS SPACE	Suite, Apt. •, etc.  Suite, Apt. •, etc.  Suite, Apt. •, etc.  City & State  Country  Special Formand Paint	Suite, Apt. #, etc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  Country  Country  Special of Status Desired  Sta	Suite, Apt. #, etc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  Country  Country  Special of Status Desired  Sta	Suite, Apt. 6, etc.    Suite, Apt. 6, etc.   Suite, Apt. 6, etc.   DO NOT WRITE IN THIS SPACE	Suite, Apt. 6, etc.    Suite, Apt. 6, etc.   Suite, Apt. 6, etc.   DO NOT WRITE IN THIS SPACE	Suite, Apt. #, etc.    Suite, Apt. #, etc.   DO NOT WRITE IN THIS SPACE	Suite, Apt. #, etc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  City & State  Country  Country  Country  S. Certificate of Status Desired  \$8.75 Additional Fee Required  *8.75 Additio	<u> </u>	Place of Business					23	
2. Principal Place of Business  Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  City & State  City & State  Country  Zip  Country  5. Certificate of Status Desired Fee Required Fee Required Fee Required Fee Required Fee Required Free Required Free BORN, JOHN B 3636 FISHER ROAD PALM HARBOR FL 34683  City  FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature Typed or printed name of registered agent and the # applicable (NOTE Registered Agent applicable of Fee Required  FILE NOW:  9. Election Campaign Financing Trust Fund Contribution.  Added to Fees  Poly Make Check Payable to- Department of State	DO NOT WRITE IN THIS SPACE  El Number	2. Principal Place of Business  3. Mailing Address  Suile, Apt. #, etc.  Suile, Apt. #, etc.  DO NOT WRITE IN THIS SPACE  City & State  City & State  City & State  Country  Zip  Country  Zip  Country  S. Certificate of Status Desired  Fee Required  Fee Required  Fee Required  FREEBORN, JOHN B  36.36 FISHER ROAD  PALM HARBOR FL 34683  City  FL Zip Code  Signature  Dopations food or printed name of Registered Agent (MOTE Registered Agent), or both, in the state of Florida.  Signature  Dopations food or printed name of Registered Agent (MOTE Registered Agent agent, or both, in the state of Florida.  Signature  Dopations food or printed name of Registered Agent (MOTE Registered Agent agent)  FILE NOW:  FILE NOW:  S. Election Campaign Financing Fruit Fund Contribution.  Added to Fees  Make Check Payable to  Department of State  CHATRIMAN TIEXITIC:  Dolede  MARD, REV. PATRICKS, TO Delete  MARD, REV. PATRICKS, TO STATE TO Delete  MARD, TO STATE TO STATE TO Delete  MARD, REV. PATRICKS, TO STATE TO DELETE  MARE AGENCY. TO STATE TO DELETE TO DELETE  MARE AGENCY. TO STATE TO DELETE TO DELETE  MARC TO STATE TO STATE TO DELETE TO D	2. Principal Place of Business 3. Mailing Address  Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE  City & State City & State 59-1090703 Application of City & State 59-1090703 Application of State Desired 59-1090703 State Additional Policy 59-1090703 State Desired 59-1090703 Additional Policy 59-1090703 Additional Policy 59-1090703 Additional Policy 59-1090703 State Desired 59-1090703 Additional Policy 59-1090703 State Desired 79-1090703 State	2. Principal Place of Business  3. Mailing Address  Suite, Apt. #, etc.  DO NOT WRITE IN THIS SPACE  City & State  FREEBORN, JOHN B  3636 FT SHERR ROAD  PALM HARBOR FL 34683  City  FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered diffice or registered agent, or both, in the state of Florida.  Signature  Engineer Special States (P.O. Box Number is Not Acceptable)  City  FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered diffice or registered agent, or both, in the state of Florida.  Signature  Engineer Special States (P.O. Box Number is Not Acceptable)  City  FL Zip Code  City  FL Zip Code  City  FL Zip Code  The Description of Registered agent, or both, in the state of Florida.  Signature Special State of Registered agent, or both, in the state of Florida.  Signature Special State of Registered agent, or both, in the state of Florida.  Signature Special State of Registered agent, or both, in the state of Florida.  Signature Special State of Registered agent, or both, in the state of Florida.  Signature Special State of Registered agent, or both, in the state of Florida.  Signature Special State of Registered Agent  City  FL Zip Code  City  FL Zip C	2. Principal Place of Business  3. Mailing Address  Suite, Apt. #, etc.  DO NOT WRITE IN THIS SPACE  City & State  City State  City State  City State  City State  REEBORN, JOHN B  3636 FTSHER ROAD  PALM HARBOR FL 34683  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered diffice or registered agent, or both, in the state of Florida.  SIGNATURE  SIGNATURE  FILE NOW:  FILE NOW:  FILE NOW:  SIGNATURE  CHATERANY: FLEETIC:  WARNER, TUDITH  STORE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  INLL  WARNER, TUDITH  STORE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  UNDERSTANDINGS  SIGNATURE  UNDERSTANDINGS  CITY ST. PRESIDENT  UNDERSTANDINGS  SIGNATORIES  OUNSELVANDESS  SIGNATORIES  THE NOW:  STORE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  STORE ADDITIONS CITY ST. PRESIDENT  UNDERSTANDINGS  STORE ADDITIONS ST. PRESIDENT  UNDERSTANDINGS  CITY ST. PRESIDENT  UNDERSTANDINGS  STORE ADDITIONS CITY ST. PRESIDENT  UNDERSTANDINGS  STORE ADDITIONS STORE ADD	2. Principal Place of Business  3. Mailing Address  Suite, Apt. #, etc.  DO NOT WRITE IN THIS SPACE  City & State  City State  City State  City State  City State  REEBORN, JOHN B  3636 FTSHER ROAD  PALM HARBOR FL 34683  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered diffice or registered agent, or both, in the state of Florida.  SIGNATURE  SIGNATURE  FILE NOW:  FILE NOW:  FILE NOW:  SIGNATURE  CHATERANY: FLEETIC:  WARNER, TUDITH  STORE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  INLL  WARNER, TUDITH  STORE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  UNDERSTANDINGS  SIGNATURE  UNDERSTANDINGS  CITY ST. PRESIDENT  UNDERSTANDINGS  SIGNATORIES  OUNSELVANDESS  SIGNATORIES  THE NOW:  STORE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  STORE ADDITIONS CITY ST. PRESIDENT  UNDERSTANDINGS  STORE ADDITIONS ST. PRESIDENT  UNDERSTANDINGS  CITY ST. PRESIDENT  UNDERSTANDINGS  STORE ADDITIONS CITY ST. PRESIDENT  UNDERSTANDINGS  STORE ADDITIONS STORE ADD	2. Principal Place of Business  3. Mailing Address  Suite, Apt. 4. etc.  DO NOT WRITE IN THIS SPACE  City & State  Size of Address of Status Desired  Status Desired  \$ 3. 75 Additional  FREEBORN, JOHN B  36.36 FISHER ROAD  PALM HARBOR FL 34683  City  FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered diffice or registered agent, or both, in the state of Florida.  SIGNATURE  Signature tond or private name of inspection agent and the accinction (Information and address of Community Statement (Information agent and inspection agent age	2. Principal Place of Business 3. Mailing Address   Suite, Apt. #, etc.   DO NOT WRITE IN THIS SPACE    City & State   City & State   4. FEI Number   59-1090703   Application   Not Applicable   79-1090703   Not Applicable   Street Address of Status Desired   \$8.75 Additional   For Required   79-1090703   Not Applicable   Street Address of Status Desired   \$8.75 Additional   For Required   79-1090703   Not Applicable   Street Address of Not Registered Agent   79-1090703   Not Acceptable   Street Address (P.O. Box Number is Not Acceptable)  Street Addres	Sulfe, Apt. #, etc.  Sulfe, Apt. #, etc.  City & State  RREEBORN, JOHN B  3636 FISHER ROAD  PALM HARBOR FL 34683  City  FL Zp Code  8. The above named entity submits this statement for the purpose of changing its registered diffice or registered agent, or both, in the state of Florida.  SIGNATURE  SIGNATURE  Equation 1000 or present agent and in supremot opera and the registable  10. OFFICERS AND DIRECTORS  Trust Fund Contribution.  Detection 101.  CHAIRMAN: "TECRITIC".  Detection 101.  CHAIRMAN: "TECRITIC".  Detection 101.  WARD, REV. PATRICK J.  SIGNATURE DECEMATER DR  DINNEDIN FL 34698  DINNEDIN FL 34698  CITY-ST-2P  DINNEDIN FL 34698  CITY-ST-2P  TITLE  WARE  VICE PRESIDENT  WARE  CROOK, THOMAS M; "Detect India  Ware  CROOK, THOMAS M; "Detect India  MARE  CROOK, THOMAS M; "Detect India  MARE  CROOK, THOMAS M; "Detect  MARE  CR	Suite, Apt. #, etc.    Suite, Apt. #, etc.   Suite, Apt. #, etc.   DO NOT Writte In This SPACE	(					m a	0.0	
DUNEDIN FL 34698-6916 US  2. Principal Place of Business  Suite, Apt. #, etc.  Suite, Apt. #, etc.  DO NOT WRITE IN THIS SPACE  City & State  Street Address of New Registered Agent  Name  City & FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  Signature  Signatu	DO NOT WRITE IN THIS SPACE  El Number	DUNEDIN FL 34698-6916 US  2. Principal Place of Business  3. Mailing Address  Suite, Apt. #, etc.  City & State  City & State  City & State  City & State  Country  Zip  Country  S. Certificate of Status Desired  FREEBORN, JOHN B 3636 FISHER ROAD  PALM HARBOR FL 34683  City  The above named entity submits this statement for the purpose of changing its registered diffice or registered agent, or both, in the state of Florida.  SIGNATURE  Signature  Signature  Signature  Signature  Signature  CHATRIAN: FEETION  SIGNATURE  Signature  CHATRIAN: FEETION  SIGNATURE  Signatu	DUNEDIN FL 34698-6916 US  2. Principal Place of Business  3. Mailing Address  Suite, Apt. #, etc.  City & State  C	DUNEDIN FL 34698-6916 US  2. Principal Place of Business  3. Mailing Address  Suite, Apt. #, etc.  City & State  City & State  City & State  City & State  Country  Zip  Country  Zip  Country  Zip  Country  Signature of Status Desired  4. FEI Number  59-1090703  Applied For  Not Applicable  \$8.75 Additional  Fee Required  Fee Required  Fee Required  Fee Required  State Address of New Registered Agent  Name  Free Required  Streat Address (P.O. Box Number is Not Acceptable)  Streat Address (P.O. Box Number is Not Acceptable)  Streat Address (P.O. Box Number is Not Acceptable)  FLE NOW:  SIGNATURE  Signature begreated agent of principal princ	DUNEDIN FL 34698-6916 US  2. Principal Place of Business  3. Mailing Address  Suite, Apt. #, etc.  City & State  City & State  City & State  City & State  Country  Zip  Country  Zip  Country  Zip  Country  Signature of Status Desired  4. FEI Number  59-1090703  Applied For  Not Applicable  \$8.75 Additional  Fee Required  Fee Required  Fee Required  Fee Required  State Address of New Registered Agent  Name  Free Required  Streat Address (P.O. Box Number is Not Acceptable)  Streat Address (P.O. Box Number is Not Acceptable)  Streat Address (P.O. Box Number is Not Acceptable)  FLE NOW:  SIGNATURE  Signature begreated agent of principal princ	DUNEDIN FL 34698-6916 US  2. Principal Place of Business  3. Mailing Address  Suite, Apt. #, etc.  City & State  City & State  City & State  City & State  Country  Zip  Country  Zip  Country  Zip  Country  Specification of Status Desired  4. FEI Number  59-1090703  Applied For  Not Applied For	DUNEDIN FL 34698-6916 US  2. Principal Place of Business  3. Mailing Address  Suite, Apt. #, etc.  City & State  C	DUNEDIN FL 34698-6916 US  2. Principal Place of Business  Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  City & State  City & State  City & State  Country  Zip  Country  5. Certificate of Status Desired  Fee Required  Fire EBORN, JOHN B  3636 FTSHER ROAD  PALM HARBOR FL 34683  City  FL Zip Code  8. The above named entity submits this statement for the purpose of changing its repistered office or registered agent, or both, in the state of Florida.  SIGNATURE  SIGNATURE  SUPPLIANCE STATES SET 28  UNIT MAKE  CITY STATES SET 28  GENERATORISS  GONS STATES SET Address TO OFFICERS AND DIRECTORS IN 10  CITY STATES SET 28  CITY STATES SET 28  Make Check Payable to Desire SET 24698  GONS STATES SET Address TO OFFICERS AND DIRECTORS IN 10  CITY STATES SET ADDRESS  GONS STATES SET ADDRESS  GONS STATES SET ADDRESS  GONS STATES SET ADDRESS  THE NAME  MAKE CHARK MANIT SECRITICS  GONS STATES SET ADDRESS  GONS STATES STATES SET ADDRESS  GONS STATES STATES SET ADDRESS  GONS STATES ADDRESS  GONS STATES STATES SET ADDRESS  GONS STATES ADDRESS  GONS STATES STATES SET ADDRESS  GONS STATES ADD	DUNEDIN FL 34698-6916 US  2. Principal Place of Business  3. Mailing Address  Suite, Apr. #, etc.  City & State  Country  Do NOT Writte In This Space  Applied For Not Applied Fo	DUNEDIN FL 34698-6916 US  2. Principal Place of Business  Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  City & FL  Zip Code  Signature in this statement for the purpose of changing its registered diffice or registered agent, or both, in the state of Florida.  Signature  Signature  Signature  Signature  City & State  City & Sta	Principal Pla	<del></del>	<del></del>					
Principal Place of Business  639 EDGEWATER DRIVE  639 EDGEWATER DRIVE  DUNEDIN FL 34698-6916 US  2. Principal Place of Business  3. Mailing Address  Suite, Apr. #, etc.  DO NOT WRITE IN THIS SPACE  City & State  Country  Zip  Country  Zip  Country  5. Certificate of Status Desired  6. Name and Address of Current Registered Agent  7. Name and Address of New Registered Agent  FREEBORN, JOHN B  3636 FISHER ROAD  FALM HARBOR FL 34683  City  FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  Signature  FILE NOW:  9. Election Campaign Financing  Trust Fund Contribution.  PELS 5.00 May Be  Make Check Payable to-  Trust Fund Contribution.  Department of State	DO NOT WRITE IN THIS SPACE  El Number	Mailing Address 639 EDGEWATER DRIVE 639 EDGEWATER DRIVE DUNEDIN FL 34698-6916 US  2. Principal Place of Business 3. Mailing Address Sulfe, Apr. 4, etc. DUNEDIN FL 34698-6916 US  2. Principal Place of Business 3. Mailing Address Sulfe, Apr. 4, etc. DUNEDIN FL 34698-6916 US  2. Principal Place of Business 3. Mailing Address Sulfe, Apr. 4, etc. DO NOT WRITE IN THIS SPACE City & State City & Stat	Principal Place of Business  Mailing Address 639 EDGEWATER DRIVE DUNEDIN FL 34698-6916 US  2. Principal Place of Business  Suite, Apt. #, etc.  City & State  City & FL  City & State  City & FL  City & FL  City & City & City & State  City & FL  City & FL  City & FL  City & City & State  City & FL  City &	Principal Place of Business  639 EDCEMATER DRIVE  639 EDCEMATER DRIVE  DUNEDIN FL 34698-6916  US  2. Principal Place of Business  3. Mailing Address  2. Principal Place of Business  3. Mailing Address  Suite, Apt. #, etc.  DO NOT WRITE IN THIS SPACE  City & State  City & FL Zp Code  StiGNATURE  City & FL Zp Code  StiGNATURE  City & FL Zp Code  Stignation To Code in Principle City City City City City City City City	Principal Place of Business  639 EDCEMATER DRIVE  639 EDCEMATER DRIVE  DUNEDIN FL 34698-6916  US  2. Principal Place of Business  3. Mailing Address  2. Principal Place of Business  3. Mailing Address  Suite, Apt. #, etc.  DO NOT WRITE IN THIS SPACE  City & State  City & FL Zp Code  StiGNATURE  City & FL Zp Code  StiGNATURE  City & FL Zp Code  Stignation To Code in Principle City City City City City City City City	Principal Place of Business  639 EDCEWATER DRIVE  639 EDCEWATER DRIVE  DUNEDIN FL 34698-6916  US  2. Principal Place of Business  3. Mailing Address  Suite, Act. #, etc.  DUNEDIN FL 34698-6916  US  2. Principal Place of Business  3. Mailing Address  Suite, Act. #, etc.  DO NOT WRITE IN THIS SPACE  City & State  City & FL Zip Code  The above named entity submits this statement for the purpose of changing its repistered digent or both, in the state of Florida.  SIGNATURE  SIGNATURE  FULL NOW:  FEE 15 481.25	Principal Place of Business  Mailing Address 639 EDGEWATER DRIVE DUNEDIN FL 34698-6916 US  2. Principal Place of Business  Suite, Apt. #, etc.  City & State  City & FL  City & State  City & FL  City & FL  City & City & City & State  City & FL  City & FL  City & FL  City & City & State  City & FL  City &	Principal Place of Business  Mailing Address 639 EDGEWATER DRIVE DUNEDIN FL 34698-6916 US  2. Principal Place of Business  Sulle, Apt. 4, etc.  City & State	Principal Place of Business  Assign Address 639 EDGEWATER DRIVE DUNEDIN FL 34698-6916 US  2. Principal Place of Business  Suits, Apt. #, etc.  City & State	Frincipal Place of Business  639 EDGEWATER DRIVE DUNEDIN FL 34698-6916 US  2. Principal Place of Business  Suite, Apt. #, etc.  DO NOT WRITE IN THIS SPACE  City & State  City & State  City & State  Country  Zip  Country  Zip  Country  Zip  Country  S. Certificate of Status Desired  S. Maring Address  Suite, Apt. #, etc.  DO NOT WRITE IN THIS SPACE  City & State  City & State  City & State  Country  S. Certificate of Status Desired  S. RATS Additional Fee Required  Fee Required  FREEBORN, JOHN B  3636 FISHER ROAD  PALM HARBOR FL 34683  City  FL Zip Code  S. Tho above named entity submits this statement for the purpose of changing its registered agent, or both, in the state of Fiorids.  SIGNATURE  SUBMINITE FREE State  CHATRIMAN* TERATILIC:  Delete  MARNER, PRESIDENT  WARD, REV. PATRICK J  SIREFARDES  CITY ST-2P  CHATRIMAN* TERATILIC:  Delete  WARNER, JUDITH  SIREFARDES  CITY ST-2P  CHATRIMAN* TERATILIC:  Delete  WARNER, JUDITH  SIREFARDES  CITY ST-2P  CHAPTER ADDITION FOR Delete  WARNER, JUDITH  SIREFARDES  CITY ST-2P  CHAPTER ADDITION FOR Delete  TITLE  WARNER, JUDITH  SIREFARDES  CITY ST-2P  CHAPTER ADDITION FOR Delete  TITLE  CHAPTER ADDITION FOR DELET  WARNER, JUDITH  SIREFARDESS  CITY ST-2P  CHAPTER ADDITION FOR DELET  CHAPTER ADDITION FOR ADDITION		TURCH OF THE GOOD SHEE	PHERD, INC.		1			
639 EDGEWATER DRIVE DUNEDIN FL 34698-6916 US  2. Principal Place of Business  3. Mailing Address  Suite, Apt. #, etc.  City & State  City & State  Country  Zip  Country  Zip  Country  59-1090703  Applied for Status Desired  6. Name and Address of Current Registered Agent  FREEBORN, JOHN B  3636 FISHER ROAD  PALM HARBOR FL 34683  City  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florids.  SIGNATURE  Signature, hoed or prired name of registered agent and title # applicable  (NOTE Registered Agent agents required registered agent, or both, in the state of Florids.  FILE NOW:  9. Election Campaign Financing  Free File Note:  Free File Note:  Pagestered Agent agents required required registered agent, or both, in the state of Florids.  Make Check Payable to Department of State  Payable to Department of State	DO NOT WRITE IN THIS SPACE  El Number	Mailing Address 639 EDGEWATER DRIVE 639 EDGEWATER DRIVE DUNEDIN FL 34698-6916 US  2. Principal Place of Business 3. Mailing Address Sulfe, Apr. 4, etc. DUNEDIN FL 34698-6916 US  2. Principal Place of Business 3. Mailing Address Sulfe, Apr. 4, etc. DUNEDIN FL 34698-6916 US  2. Principal Place of Business 3. Mailing Address Sulfe, Apr. 4, etc. DO NOT WRITE IN THIS SPACE City & State City & Stat	Principal Place of Business  Assiling Address  3. Mailing Address  DUNEDIN FL 34698–6916 US  2. Principal Place of Business  Suite, Apt. 9, etc.  City & State  City & FL  City City  City & FL  City City  City City City  City City Cit	Principal Place of Business  Againg Address 639 EDCEWATER DRIVE 639 EDCEWATER DRIVE DUNEDIN FL 34698-6916 US  2. Principal Place of Business  3. Mailing Address  Suite, Apt. #, etc.  City & State  City & FL Zp Code  8. The above named entity submits this statement for the purpose of changing its repistered digent or both, in the state of Florids.  SIGNATURE  Signature Treed or presentance of registered agent, or both, in the state of Florids.  SIGNATURE  Signature Treed or presentance of registered agent, or both, in the state of Florids.  SIGNATURE  Signature Treed or presentance of registered agent, or both, in the state of Florids.  SIGNATURE  Signature Treed or presentance of registered agent and manufactory  City & FL Zp Code  8. The above named entity submits this statement for the purpose of changing its repistered digent agent or both, in the state of Florids.  SIGNATURE  Signature Treed or presentance of Registerial Agent  City & FL Zp Code  Signature Treed or Present Agent  City & FL Zp Code  City & F	Principal Place of Business  Againg Address 639 EDCEWATER DRIVE 639 EDCEWATER DRIVE DUNEDIN FL 34698-6916 US  2. Principal Place of Business  3. Mailing Address  Suite, Apt. #, etc.  City & State  City & FL Zp Code  8. The above named entity submits this statement for the purpose of changing its repistered digent or both, in the state of Florids.  SIGNATURE  Signature Treed or presentance of registered agent, or both, in the state of Florids.  SIGNATURE  Signature Treed or presentance of registered agent, or both, in the state of Florids.  SIGNATURE  Signature Treed or presentance of registered agent, or both, in the state of Florids.  SIGNATURE  Signature Treed or presentance of registered agent and manufactory  City & FL Zp Code  8. The above named entity submits this statement for the purpose of changing its repistered digent agent or both, in the state of Florids.  SIGNATURE  Signature Treed or presentance of Registerial Agent  City & FL Zp Code  Signature Treed or Present Agent  City & FL Zp Code  City & F	Principal Place of Business  Assign Applied For DIVE BUNEDIN FL 34698-6916 US  2. Principal Place of Susiness  Susie, Apt. #, etc.  City & State  City & Sta	Principal Place of Business  Assiling Address  3. Mailing Address  DUNEDIN FL 34698–6916 US  2. Principal Place of Business  Suite, Apt. 9, etc.  City & State  City & FL  City City  City & FL  City City  City City City  City City Cit	Principal Place of Business  Mailing Address 639 EDGEWATER DRIVE DUNEDIN FL 34698-6916 US  2. Principal Place of Business  Suits, Apt. 9, etc.  City & State	Principal Place of Business  Assign Address 639 EDGEWATER DRIVE DUNEDIN FL 34698-6916 US  2. Principal Place of Business  Suits, Apt. 4, etc.  City 4 State  City 4 State  City 5 State  City 6 State  City 6 State  City 6 State  City 7 State  City 8 State  City 9 State  Country  S. Certificate of Status Desired  See Required  Required  FREEBORN, JOHN B  3636 FISHER ROAD  PALM HARBOR FL 34683  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  Signature  FILE NOW:  FILE NOW:  S. Election Compalign Financing  Trust Fund Contribution  The Make  Make  City PATRICK J  Dete  Make Check Payable to-  Department of State  City PATRICK J  Dete  Make  MARD, REV. PATRICK J  Dete  MARD, REV. PATRICK J  Dete  MARD SIGNATURE  CITY ST-20  Dete  MARNER JUDITH  MARNER JUDITH  MARNER JUDITH  MARNER JUDITH  MARNER JUDITH  MARNER JA698  CITY ST-20  DIVIDENT T. 34698  CITY ST-20  DETERMINE TO THE MARKET TO	Principal Place of Business 639 EDGEWATER DRIVE DUNEDIN FL 34698-6916 US 2. Principal Place of Business 3. Mailing Address Sulfe, Apt. 4, etc.  DUNEDIN FL 34698-6916 US 2. Principal Place of Business Sulfe, Apt. 4, etc.  City & State Country Country City & State Country Country City & State Country City & State Country Country City & State City & St	THE CH							