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rida.

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

PD

SIGNATURE: HULL, LAWRENCE R

3204 COLTER ST

City-State-Zip: PANAMA CITY FL 32404

Address

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# N09000009092

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

red: Yes

01/15/2020

Date

Date