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| • , | AX CORPORA | ATION | | | | | 1 10 11 10 12 10 12 10 10 10 10 10 10 10 10 10 10 10 10 10 | 1 14 421 (111 1 41111 | ANDER DI DIN DI | AIH AIRIK HIRIN IRRI |
| Principal Place of | f Rusiness | · · · · · · · · · · · · · · · · · · · | M: | ailing Address | | | | | | |
| 4215 SOUTH SUITE 100 | IPOINT BLVD | | | 4215 SOUTHPOINT BLY SUITE 100 JACKSONVILLE FL 322 | | | Date Incorporated or Qualified | 3a. Date | of Last R | erxort |
| | | | | | | | 09/29/1958 | | 03/29/1 | 995 |
| 2. Principal Place | e of Business | | 2a. 26 | Mailing Address | | | 4. FEI Number 59-0839926 | | ⊢ | Applied For Not Applicable |
| Suite, Apt. #, | etc. | | 27 | Suite, Apt. #, etc. | ar dan a adam di administrativa di Personi Part Ne | | 5. Certificate of Status Desired | | | Additional Required |
| City & State | | | | City & State | | | 6. Election Campaign Financing | | \$5.0 | 0 May Be |
| Zip 24 | 25 | untry | 28 | Zip | Country 30 | | Trust Fund Contribution 8. This corporation has liability of Florida Statutes | or intangible ta | | d to Fees 199.032, |
| | | ddress of Current | | | | Name | 10. Name and Address of New | Registered | Agent | |
| ANSBA | CHER, LEWIS | | | | l 1 | | dress (P.O. Box Number is Not Accept | able) | | |
| 4215 S | OUTHPOINT BL | | | | 83 | | uless (170. Downlands to Not 1 to the | | | |
| JAUKSI | ONVILLE FL 322 | 210 | | | 88 | | | | | |
| | | | | | R4 | City | | | 85 Zu | o Code |
| 11 Purcuant to | the provisions of | Sections 607 0502 a | and 60 | 07 1508 Florida Statutes | the above par | City med come | oration submits this statement for the r | FL purpose of ch | anging its r | p Code registered office |
| or registered | d agent, or both, ir | n the State of Florida | a. Suci | 07.1508, Florida Statutes, h change was authorized .0505, Florida Statutes. | the above par | mod corne | oration submits this statement for the part of directors. I hereby accept the ap | FL ourpose of ch oppointment as | anging its r | registered office |
| or registered familiar with SIGNATURE | d agent, or both, ir , and accept the c | n the State of Florida | a. Suci n 607 | h change was authorized .0505, Florida Statutes. | , the above-nar by the corpora | med corpo ation's bo | oration submits this statement for the part of directors. I hereby accept the apart when reinstaling | FL purpose of ch opointment as | anging its r | registered office |
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