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14. I do 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under or an accurate and that my signature shall have the same legal effect as if made under or an accurate and that my signature shall have the same legal effect as if made under or an accurate and that my signature shall have the same legal effect as if made under or an accurate and that my signature shall have the same legal effect as if made under or an accurate and that my signature shall have the same legal effect as if made under or an accurate and that my signature shall have the same legal effect as if made under or accurate and that my signature shall have the same legal effect as if made under or accurate and that my signature shall have the same legal effect as if made under or accurate and that my signature shall have the same legal effect as if made under or accurate and that my signature shall have the same legal effect as if made under or accurate and that my signature shall have the same legal effect as if made under or accurate and that my signature shall have the same legal effect as if made under or accurate and that my signature shall have the same legal effect as if made under or accurate and that my signature shall have the same legal effect as if made under or accurate an accurate and that my signature shall have the same legal effect as if made under or accurate and that my signature shall have the same legal effect as if made under or accurate an accurate and that my signature shall have the same legal effect as if made under or accurate an accu	off-ce or i agent 1 a SIGNATURE II. SIGNATURE SIGNATURE SIRAET ADDRESS CITY-ST-ZIP DILE STREET ADDRESS CITY-ST-ZIP DILE STREET ADDRESS CITY-ST-ZIP DILE STREET ADDRESS CITY-ST-ZIP DILE STREET ADDRESS SIREET ADDRESS SIREET ADDRESS	registered agent or bo am fambar with and ac Sgnabre traid e plint d na PD SPRADLIN, LEW 4116 S THIRD S JACKSONVILLE	ith, in the State of Florid peoplethe op gabons of, meetingesechann and the OFFICERS AND DIREC IS D ISTREET	A. Such change was Soction 607.0505, F Augnosise: (NC TORS DELETE DELETE DELETE DELETE DELETE DELETE DELETE DELETE DELETE	tes, the above-named con authorized by the corpore forida Statutes. TE Frighting Agent signature reconstruction 13, 1,1 TITLE 1,2 NAME 1,3 STREET ADDRESS 1,4 CITY - ST-ZIP 2,1 TITLE 2,2 NAME 2,3 STREET ADDRESS 2,4 CITY - ST-ZIP 3,1 TITLE 3,2 NAME 3,3 STREET ADDRESS 3,4 CITY - ST-ZIP 4,1 TITLE 4,2 NAME 4,3 STREET ADDRESS 3,4 CITY - ST-ZIP 4,1 TITLE 4,2 NAME 4,3 STREET ADDRESS 4,4 CITY - ST-ZIP 5,1 TITLE 5,2 NAME 5,3 STREET ADDRESS 5,4 CITY - ST-ZIP 5,1 TITLE 5,2 NAME 5,3 STREET ADDRESS 5,4 CITY - ST-ZIP 6,1 TITLE 6,2 NAME 6,3 STREET ADDRESS	ation's board of directors. I hereby accep	Change	ts registered