COR	E NOW: FILI PROFIT PORATION JAL REPORT	NG FEE AI	6	PARTMENT	OF 5					
	1996		<i>,</i>	etary of Stat		ONS				
DOCUMENT # 445161			(3)							
•	INGTON'S TRAI	. Shop inc.								
Principal Place of Business Mailing Address							- - - - - - - - - - - - - - - - - - -	10 E119   101 D101	I IIIIII IIIII III	DI ULUAR ULUIR UUU
	13th Street Le FL 32609-2839	2331 N.W. 13TH STREET GAINESVILLE FL 32009-2839								
							3. Date Incorporated or Qualifie 02/01/1974	ed <b>3a</b> . Da	te of Last R 05/01/1	
2. Principal Pla	ace of Business	2a. Mailing Address 26			4. FEI Number 59-1583325		►	Applied For Not Applicable		
Suite, Apt. : 22	#, etc.		Suite, Apt. #, etc. 27			<ol> <li>6. Certificate of Status Desired</li> </ol>	[]	\$8.75	Additional Required	
City & State	)	City & State			····· · · · · · · · · · · · · · · · ·	6. Election Campaign Financing Trust Fund Contribution	э Е]	\$5.0	0 May Be d to Fees	
Zip 24	Count 25	ry	Zip Ig	Country			8. This corporation has liability	for intangible Yes [] No		
	9. Name and Addr		•				10. Name and Address of Ne		d Agent	
BRASI	NGTON, BRUCE R.				81	Name				
2331 N.W. 13TH STREET				82 Street Addr			ss (P.O. Box Number is Not Accept	otable)		
GAINE	Sville FL 32609		83							
					<b>B</b> 4	City		F	85 Zi	p Code
or registeri familiar wit SIGNATURE	ed agent, or both, in the	e State of Horida. S ations of, Section 6	uch change was author 07.0505, Florida Statute	nzed by the c es.	corpo	I signature required v	ion submits this statement for the of directors. I hereby accept the a		nanging its r is registeriad	agent. I am
12.		OFFICERS AND DIF	RECTORS	13.	<u>.</u>		ADDITIONS/CHANGES TO			RS IN 12
TITLE NAME	PD Brasington, Bruce R.		DELETE	1. 1 TITLE 1.2 NAME					📋 Change	RS IN 12
STREET ADDRESS	2331 NW 13TH					ADDRESS				
CITY-ST-ZIP	GAINESVILLE F	<u>L</u>		1.4 Cl		r-zip				
TITLE NAME	st Brasington,	IANIS	DELETE	2. 1 TI 2.2 NA					🔲 Change	Addition
STREET ADDRESS	2331 NW 13TH					ADDRESS				
CITY - ST - ZIP	GAINESVILLE F	Ľ		2.4 CI	TY - S1	r-zip				
TITLE NAME			DELETE	3 1 TI 3.2 NA					🔲 Change	Addition
STREET ADDRESS						ADDRESS				
CITY - ST - ZIP				3.4 CI						
TITLE NAME			DELETE	4. 1 TI					🔲 Change	Addition
STREET ADDRESS				4 2 NA 4 3 ST		ADDHESS				
CITY-ST-ZIP				4 4 CH	IY-S1	1 - ZIP				
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NAME STREET ADDRESS				5.2 NA 5.3 ST		ADDRESS				
CITY-St-ZIP				5.4 CI		}				
TITLE			DELETE	6. 1 TI					Change	Addition
NAME STREET ADDRESS				6.2 NA 6.3 ST		ADDRESS				
City-St-ZiP				6.4 CI						
14. I do hereby certify that	the information indicate	ed on this annual re	port or supplemental an	mished and a nual report is	does s true	not qualify for e and accurate	the exemption stated in Section 1 and that my signature shall have eport as required by Chapter 607	the same leas	al effect as if	made under
appears in	Block 12 or Block 13 i	changed, or on an	attachmen with an ad	dress.						, I
SIGNAT		TE AND TYPED OR PRIN	TED NAME OF SIGNING OFFI		W/.	s BRA	51NGTON 4/28/90 Date	: 35	337) Daytime Phore	0521