COF	PROFIT RPORATION JAL REPORT 1997	FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		Apr 28 1997 8:00am Secretary of State		
P. AUSE		Mailing Address PO BOX 92037 GAINESVILLE FL 32607 US		3. Date Incorporated or Qualified	3a. Date of Last R	
			······································	10/01/1974	05/01/1996	
2. Principal P	Place of Business	28. Mailing Address	237	4. FEt Numbor 59-1547645	┝╌╇╾╴╴	oplied For
Sulte, Apt.	. #, etc.	Suite, Apt. #, etc.	T	5. Certificate of Status Desired	\$8.75	Additional aquired
City & Stat	te	27 City & State	, ,,	6. Election Campaign Financing		May Be
Zip	Country	28 GAINESVILL	Country	Trust Fund Contribution		to Fees
24	25	29 32607	30		Yes 🗋 No	. 199.032,
BRO	9. Name and Address of Cu DWN, AUSE	urrent Registered Agent	81 Name	10. Name and Address of New Re	egistered Agent	.
401	0 F Newberry RD		82 Street Add	tress (P.O. Box Number is Not Accepta	ble)	
GVI	LLE FL 32607		83	······································		
			84 City			Code
11. Pursuant	to the provisions of Sections 607	0502 and 607 1508 Elorida Statu	tes the above-named cor	noration submits this statement for the		
office or agent. I a	registered agent, or bath, in the s am familiar with, and accept the c	State of Florida, Such change was obligations of Section 607.0505, Fl	authorized by the corpora orida Statutes.	poration submits this statement for the ation's board of directors. I hereby acce	pl the appointment as	registered
SIGNATURE	Signature, typed or philled name of register		H Registereo Agont signature regi	ired when reinstating)	-21-97	
12. TITLE	OFFICERS PST		13. 1.1 TOLE	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTOF	RS IN 12
NAME	BROWN, AUSE		1.2 NAME			
STREET ADDRESS			1.3 STREET ADDRESS			
CITY-ST-ZIP TITLE	G VILLE, FL 00000	DELETE	2.1 TITLE		Change	E Additio
NAME			2.2 NAME		Cumige	
STREET ADDRESS			2.3 STREET ADDRESS			
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TITLE			3.2 NAME		<u> </u>	
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NAME)		30	
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