FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT #
1. Corporation Name

519368

(5)

KENNETH P. COFFAE, D.D.S., P.A.

|--|

| Suite, Apt # - 192 | Suite April 1995 2 Principal Pages of Business 2 In Call Mills Ave . 2a Making Address 6 M M-Mills Ave . 3a That of Isaat Report 1995 2 In Call Mills Ave . 2a Making Address 6 M M-Mills Ave . 3a That of Isaat Report 1995 2 Suite April 1995 2 | | of Business | | | | |
|--|--|---|---|---|--|---|--|
| 12/01/1976 06/12/1985 22 Principal Pace of Business 2a Malary Address 610 N-Mills Ave. 35-1737255 Applied Principal Pace of Business 2a Malary Address 610 N-Mills Ave. 35-1737255 Applied Principal Pace of Business 2a Applied Principal Pace of Business 2a Applied Principal Pace of Business Principal Pace of Busine | Principal Paper of Bearmers 2n | | | | IVE | | |
| Solid Apt # | 20 Community | | | | | | |
| Solite, Apt #, etc. Solite, Apt #, etc. | Solic Apt. #, etc. Suite 910 27 Solic Apt. #, etc. Suite 910 27 City & State 0 PLATH 00 FL 28 City & State 0 PLATH 00 FL 28 City & State 0 PLATH 00 FL 28 Page 27 32803 20 20 20 20 20 20 20 20 20 20 20 20 20 | | | 2a. Marling Address 610 | M.Mills Ave. | 4. FEI Number 59-1737255 | Applied For Not Applicable |
| City & State City & State Operation FL 28 28 28 28 328 33 28 33 30 28 33 30 28 30 28 30 28 30 28 30 28 30 28 30 28 30 28 30 28 30 28 30 28 30 28 30 28 30 28 30 28 30 28 30 30 30 30 30 30 30 3 | City & State OF LATION FL. 20 32803 30 OUT AND FL. 21 Name and Address of Durrent Registered Agent COFFAE, KENNETH P. 82 Stroot Address FG. Durrent Registered Agent 11. Pursuant to the provisions of Sections 607 OF GG. Pursuant Facility And Fa | Suite, Apt. #, | etç. | 27 SU | ite 210 | 5. Certificate of Status Desired | 1 1 |
| 270 32903 25 25 25 25 25 25 25 2 | 20 32903 5 | City & State | | City & State OR | LANDO FL. | | 1 1 ' |
| 9. Name and Address of Current Registered Agent COFFAE, KENNETH P. 630 E. COLONIAL DRIVE ORLANDO FL 32803 11. Pursuant to the provisions of Sections 607 0502 and 607 1509, Furida Statutes be above named corporation submited by submitted in the appointment as registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. Hereby accept the appointment as registered agent, or both, in the State of Florida Such change was authorized by the corporation submited by submitted for the purpose of changing its registered agent. I familiar with, and accept the obligations of Section 607 0505, Florida Statutes SIGNATURE Symbol by the displayment and the provisions are change from a submit and the state of Florida Such change was authorized by the corporation's board of directors. Hereby accept the appointment as registered agent. I familiar with, and accept the obligations of Section 607 0505, Florida Statutes. 12. OF FIGE HS AND DRECTORS 12. OF FIGE HS AND DRECTORS 13. AND HONSOCHANGES TO OFFICE HS AND DRECTORS IN 12. AND HONSOCHANGES TO OFFICE HS AND DRECTORS IN 12. AND HONSOCHANGES TO OFFICE HS AND DRECTORS IN 12. AND HONSOCHANGES TO OFFICE HS AND DRECTORS IN 12. AND HONSOCHANGES TO OFFICE HS AND DRECTORS IN 12. AND HONSOCHANGES TO OFFICE HS AND DRECTORS IN 12. AND HONSOCHANGES TO OFFICE HS AND DRECTORS IN 12. AND HONSOCHANGES TO OFFICE HS AND DRECTORS IN 12. AND HONSOCHANGES TO OFFICE HS AND DRECTORS IN 12. AND HONSOCHANGES TO OFFICE HS AND DRECTORS IN 12. AND HONSOCHANGES TO OFFICE HS AND DRECTORS IN 12. AND HONSOCHANGES TO OFFICE HS AND DRECTORS IN 12. AND HONSOCHANGES TO OFFICE HS AND DRECTORS IN 12. AND HONSOCHANGES TO OFFICE HS AND DRECTORS IN 12. AND HONSOCHANGES TO OFFICE HS AND DRECTORS IN 12. AND HONSOCHANGES TO OFFICE HS AND DRECTORS IN 12. AND HONSOCHANGES TO OFFICE HS AND DRECTORS IN 12. AND HONSOCHANGES TO OFFICE HS AND DRECTORS IN 12. AND HONSOCHANGES IN 12. AND HONSOCHANGES IN 12. AND HONSOCHANGES IN 12. AND HONSOCHANGES IN 12. AND HONSOCHANGE | Some and Address of Current Registered Agent 10, Name and Address of New Registered Agent 10, Name and Address 10, Name and Addre | Zip 💂 👢 | - Country | Zip 22002 | | 8. This corporation has liability for in | ntangible tax under s. 199.032, |
| COFFAE, KENNETH P. 630 E. COLONIAL DRIVE ORLANDO FL 32803 11. Pursuant to the provisions of Sections 607.0502 and 607.1506, Facilial Statutes. Inc above named corporation submits this statument for the provisions of Sections 607.0502 and 607.1506, Facilial Statutes. Inc above named corporation submits this statument for the propose of changing its registered agent, or both, in the State of Flivitial Statutes. Inc above named corporation submits this statument for the propose of changing its registered agent. I statument the obligations of Section 607.0505, Florida Statutes. SIGNATURE Signature 12. OFFICE RS AND DIFECTORS 13. ADDITIONS'CHANGES TO OFTICERS AND DIFECTORS IN 1. Intel PD | COFFAE, KENNETH P. 630 E. COLONIAL DRIVE ORLANDO FL 32803 11. Pursuant to the provisions of Sections 697-0507 and 607-1508, Faintial Studies Produce named corporations stated of from the provisions of Sections 697-0507, Faintial Studies Produce named corporations stated of from the provisions of Sections 697-0507, Faintial Studies Produce named corporations in the state of fainting with a sta | 24 56 | | | [30] | | |
| 11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Floridal Statutes he above named corporation is this statement for the purpose of changing its registered or registered agent, or both, in the State of Florida Such change was authorized by the corporation's located of directors. I hereby accept the appointment as registered or registered agent, or both, in the State of Florida Such change was authorized by the corporation's located of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida Such change was authorized by the corporation's located of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida Statutes. SIGNATURE Signature based or printed and may Janual agent as the Tagasanth (v) is figured Agent agent as may require the purpose of changing its registered agent, or both, in the State of Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PD COFFAE, KENNETH P. 22 MMS SIRRET ADDRESS 600 M. MILLS AVY. SUCH C. JULY 600 M. MILLS AVY. | SIGNATURE PO | 630 E. (| E, KENNETH P. COLONIAL DRIVE | - 1. 7 111 iii | 82 Street Add | Kenneth P. Coff | ny |
| ### Designant to the provisions of Sections 607 0502 and 607 1508, Fluridal Statutes in above named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Floridal Statutes. ### Signature types or printed are of this American Section 607 0505. Floridal Statutes. ### Signature types or printed are of this American Section 607 0505. Floridal Statutes. ### Signature types or printed are of this American Section 607 0505. Floridal Statutes. ### Signature types or printed are of this American Section 607 0505. Floridal Statutes. ### Signature types or printed are of this American Section 607 0505. Floridal Statutes. ### Signature types or printed are of this American Section 607 0505. Floridal Statutes. ### Signature types or printed are of this American Section 607 0505. Floridal Statutes. ### Signature types or printed are of this American Section 607 0505. Floridal Statutes. ### Signature types or printed are of this American Section 607 0505. Floridal Statutes. ### Signature types or printed are of this American Section 607 0505. Floridal Statutes. ### Signature types or printed are of this American Section 607 0505. Floridal Statutes. ### Signature types or printed are of this American Section 607 0505. Floridal Statutes. ### Signature types or printed are of this American Section 607 0505. Floridal Statutes. ### Signature types or printed are of this American Section 607 0505. Floridal Statutes. ### Signature types or printed are of this American Statutes. ### Signature types or printed are of this American Statutes. ### Signature types or printed are of this American Statutes. ### Signature types or printed are of this American Statutes. ### Signature types or printed are of this American Statutes. ### Signature types or printed are of this American Statutes. ### Signature types or printed are of this American Statutes. ### Signature types or printed are of this American Statutes. ### Signature types or printed are of this American | Pursuant to the provisions of Sections 607 06.09 and 601 1506, Flurida, Statuties he allows harded beyond the submit the state of changing its registered of annitial with and accept the obligations of Section 607 0505, Flurida, Statuties | UKLANI | DU FL 32803 | | | Suite 210 | DE Zus Coude |
| or registered agent, or both, in the State of Florida Such change was authorized by the corporation's bloard of decotors. I hereby accept the appointment as registered agent, if familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE Signature typed or principle of the Individual agent as the systems. Individual agent as the principle of the Individual agent as the systems. Individual agen | or registered agent, or both, in the State of Fixeds Such change was authorized by the corporation's blood of descript 1 empty accept the appointment as registered agent, 1 and familiar with, and accept the obligations of. Section 607.0505, Florids Statutes 12 | | | | 64 City | OFLANDO | FL 32803 |
| 12. | 12. OFFICE RS AND DRECTORS 13. ADDITIONS CHANGES TO OFFICE RS AND DRECTORS IN 12. | or registered | d agent, or both, in the State of Flor | rida. Such change was authorize | s, the above named corporation's bo | oration submits this statement for the purp land of directors. Thereby accept the appo | oose of changing its registered office intrient as registered agent. Lan: |
| 12. | 12. | | | Juon oor jouga, monda Sialutes. | | | |
| THE | THE PD | SIGNATURE | | | e al company | | · · · · _ · _ · · · · · · · · · · · · · |
| STREET ADDRESS 630 E. COLONIAL DR. ORLANDO FL | STREET ADDRESS 630 E. COLONIAL DR. ORLANDO FL | SIGNATURE | gnature, typed or printed halve of my stered age | rians liter tapposata. (%) | | | · |
| CHY-ST-ZIP | CHEANDO FL | SIGNATURES | ignature typed or printed have of mystered age OF FICERS AN | raiche tagasaile (201 ND DRECTORS | 13. | | GERS AND DIRECTORS IN 12 |
| CHY-ST-ZIP | CHEANDO FL | SIGNATURE S 12. | gnature typed or printoon are of regulated agre OFFICERS AN | raiche tagasaile (201 ND DRECTORS | 13. | ADDITIONS/CHANGES TO OFFI | GERS AND DIRECTORS IN 12 [K] Change [] Addition |
| NAME | NAME | SIGNATURE S 12. TITLE NAME | gnature based or printed have of majorised agree of PD COFFAE, KENNETH P. 630 E. COLONIAL DR. | raiche tagasaile (201 ND DRECTORS | 13. • UTITLE • 2 NAME | ADDITIONS/CHANGES TO OFFI | GERS AND DIRECTORS IN 12 [K] Change [] Addition |
| STREET ADDRESS 23 STREET ADDRESS 24 CUTs ST 786 | STREET ADDRESS 2 STREET ADDRESS 2 STREET ADDRESS | SIGNATURE S 12. TITLE NAME STREET ADDRESS | gnature based or printed have of majorised agree of PD COFFAE, KENNETH P. 630 E. COLONIAL DR. | raiche tagasaile (201 ND DRECTORS | 13. 1 UTULE 12 NAME 13 STREET ADDRESS | ADDITIONS/CHANGES TO OFFI | GERS AND DIRECTORS IN 12 [K] Change [] Addition |
| City St ZiP | 24 CTY ST ZIP | SIGNATURE STREET ADDRESS CITY-ST-ZIP | gnature based or printed have of majorised agree of PD COFFAE, KENNETH P. 630 E. COLONIAL DR. | ncascitite tagascalé (50) NO D'RECTORS ☐ DELETE | 13. 1 UTHE 12 NAME 13 STREET ADDRESS 14 CHY SU ZIP | ADDITIONS/CHANGES TO OFFI | GERS AND DIRECTORS IN 12 Change Addition Suite 210 |
| TITLE | THE | SIGNATURE S 12. THE NAME STREET ADDRESS CITY-ST-ZIP THE | gnature based or printed have of majorised agree of PD COFFAE, KENNETH P. 630 E. COLONIAL DR. | ncascitite tagascalé (50) NO D'RECTORS ☐ DELETE | 13. 1 THUE 12 NAME 13 STREET ADDRESS 14 CHY ST ZIP 2 1 THEE | ADDITIONS/CHANGES TO OFFI | GERS AND DIRECTORS IN 12 Change Addition |
| NAME | NAME | SIGNATURE STILL STREET ADDRESS CITY-ST-ZIP TITLE NAME | gnature based or printed have of majorised agree of PD COFFAE, KENNETH P. 630 E. COLONIAL DR. | ncascitite tagascalé (50) NO D'RECTORS ☐ DELETE | 13. 1 HILLE 12 NAME 13 STREET ADDRESS 14 CHY ST ZIP 2 1 HILE 22 NAME | ADDITIONS/CHANGES TO OFFI | GERS AND DIRECTORS IN 12 Change Addition |
| STREET ADDRESS | STREET ADDRESS | SIGNATURE S 12. TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP | gnature based or printed have of majorised agree of PD COFFAE, KENNETH P. 630 E. COLONIAL DR. | r ancher bijskoalê (v)1 ND D'RECTORS ☐ DELETE ☐ DELETE | 13. 1 HILLE 12 NAME 13 STREET ADDRESS 14 CHY SL ZIP 2 THILE 22 NAME 23 STREET ADDRESS | ADDITIONS/CHANGES TO OFFI | GERS AND DIRECTORS IN 12 R Change Addition Change Addition |
| CHY-ST-ZIP | CITY-ST-ZIP | SIGNATURE S 12. TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP | gnature based or printed have of my closed agree of PD COFFAE, KENNETH P. 630 E. COLONIAL DR. | r ancher bijskoalê (v)1 ND D'RECTORS ☐ DELETE ☐ DELETE | 13. 1 HILLE 12 NAME 13 STREET ADDRESS 14 CHY SL ZIP 2 TITLE 22 NAME 23 STREET ADDRESS 24 CHY SL ZIP | ADDITIONS/CHANGES TO OFFI | GERS AND DIRECTORS IN 12 R Change Addition Change Addition |
| TRUE | THE | SIGNATURE S 12. THE NAME STREET ADDRESS CHY-ST-ZIP THLE NAME STREET ADDRESS CHY-ST-ZIP THLE THLE | gnature based or printed have of my closed agree of PD COFFAE, KENNETH P. 630 E. COLONIAL DR. | r ancher bijskoalê (v)1 ND D'RECTORS ☐ DELETE ☐ DELETE | 13. 1 THUE 12 NAME 13 STREET ADDRESS 14 CHY ST ZIP 2 THUE 22 NAME 23 STREET ADDRESS 24 CHY ST ZIP 3 THUE | ADDITIONS/CHANGES TO OFFI | GERS AND DIRECTORS IN 12 R Change Addition Change Addition |
| NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 44 CITY-ST-ZIP TITLE DELETE 5 T TITLE Change | NAME | SIGNATURE S 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME | gnature based or printed have of my closed agree of PD COFFAE, KENNETH P. 630 E. COLONIAL DR. | r ancher bijskoalê (v)1 ND D'RECTORS ☐ DELETE ☐ DELETE | 13. 1 FILLE 12 NAME 13 STREET ADDRESS 14 CHY ST ZIP 2 THILE 22 NAME 23 STREET ADDRESS 24 CHY ST ZIP 3 THILE 32 NAME | ADDITIONS/CHANGES TO OFFI | GERS AND DIRECTORS IN 12 R Change Addition Change Addition |
| STREET ADDRESS | STREET ADDRESS | SIGNATURE S 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP | gnature based or printed have of my closed agree of PD COFFAE, KENNETH P. 630 E. COLONIAL DR. | OF BELEFIE DELETE | 13. 1 FILLE 12 NAME 13 STREET ADDRESS 14 CHY ST ZIP 2 TITLE 22 NAME 23 STREET ADDRESS 24 CHY ST ZIP 3 TITLE 32 NAME 33 STREET ADDRESS 34 CHY ST ZIP | ADDITIONS/CHANGES TO OFFI | GERS AND DIRECTORS IN 12 R Change Addition Change Addition Change Addition |
| CITY+S1-ZIP 44 CITY+S1-ZIP TITLE DUITE 5 TETLE Dtange Ado | A CHY-ST-ZIP | SIGNATURE S 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP | gnature based or printed have of my closed agree of PD COFFAE, KENNETH P. 630 E. COLONIAL DR. | OF BELEFIE DELETE | 13. 1 FILLE 12 NAME 13 STREET ADDRESS 14 CHY ST ZIP 2 TITLE 22 NAME 23 STREET ADDRESS 24 CHY ST ZIP 3 TITLE 32 NAME 33 STREET ADDRESS 34 CHY ST ZIP | ADDITIONS/CHANGES TO OFFI | GERS AND DIRECTORS IN 12 R Change Addition Change Addition Change Addition |
| THLE | TITLE | SIGNATURE S 12. TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE | gnature based or printed have of my closed agree of PD COFFAE, KENNETH P. 630 E. COLONIAL DR. | OF BELEFIE DELETE | 13. 1 FILLE 12 NAME 13 STREET ADDRESS 14 CHY ST ZIP 2 THILE 22 NAME 23 STREET ADDRESS 24 CHY ST ZIP 3 THILE 32 NAME 33 STREET ADDRESS 34 CHY ST ZIP 4 THILE | ADDITIONS/CHANGES TO OFFI | GERS AND DIRECTORS IN 12 R Change Addition Change Addition Change Addition |
| | STREET ADDRESS 53 STREET ADDRESS 53 STREET ADDRESS 54 CHT ST-ZIP 54 CHT ST-ZIP Change Addit or NAME 62 NAME Addit or NAME | SIGNATURE S 12. TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME | gnature based or printed have of my closed agree of PD COFFAE, KENNETH P. 630 E. COLONIAL DR. | OF BELEFIE DELETE | 13. 1 FILLE 12 NAME 13 STREET ADDRESS 14 CITY ST ZIP 2 THILE 22 NAME 23 STREET ADDRESS 24 CITY ST ZIP 3 THILE 32 NAME 33 STREET ADDRESS 34 CITY ST ZIP 4 THILE 42 NAME | ADDITIONS/CHANGES TO OFFI | GERS AND DIRECTORS IN 12 R Change Addition Change Addition Change Addition |
| NAME 52 NAME | STREET ADDRESS | SIGNATURE S 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP | gnature based or printed have of my closed agree of PD COFFAE, KENNETH P. 630 E. COLONIAL DR. | DELETE DELETE | 13. 1 FILLE 12 NAME 13 STREET ADDRESS 14 CITY ST ZIP 2 TITLE 22 NAME 23 STREET ADDRESS 24 CITY ST ZIP 3 TITLE 32 NAME 33 STREET ADDRESS 34 CITY ST ZIP 4 TITLE 42 NAME 43 STREET ADDRESS 44 CITY ST ZIP 4 TITLE 42 NAME 43 STREET ADDRESS 44 CITY ST ZIP | ADDITIONS/CHANGES TO OFFI | GERS AND DIRECTORS IN 12 R Change Addition Change Addition Change Addition Change Addition |
| | CHY-S1-ZIP | SIGNATURE S 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | gnature based or printed have of my closed agree of PD COFFAE, KENNETH P. 630 E. COLONIAL DR. | DELETE DELETE | 13. 1 FILLE 12 NAME 13 STREET ADDRESS 14 CITY ST ZIP 2 THILE 22 NAME 23 STREET ADDRESS 24 CITY ST ZIP 3 THILE 32 NAME 33 STREET ADDRESS 34 CITY ST ZIP 4 THILE 42 NAME 43 STREET ADDRESS 44 CITY ST ZIP 5 THILE 5 THILE | ADDITIONS/CHANGES TO OFFI | GERS AND DIRECTORS IN 12 R Change Addition Change Addition Change Addition Change Addition |
| STREET ADDRESS 5.3 STREET ADDRESS | TITLE DESCRIE 6 * TITLE Change Addition NAME 62 NAME | SIGNATURE S 12. IIILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | gnature based or printed have of my closed agree of PD COFFAE, KENNETH P. 630 E. COLONIAL DR. | DELETE DELETE | 13. 1 THUE 12 NAME 13 STREET ADDRESS 14 CITY ST ZIP 2 THUE 22 NAME 23 STREET ADDRESS 24 CITY ST ZIP 3 THUE 32 NAME 33 STREET ADDRESS 34 CITY ST ZIP 4 THUE 42 NAME 43 STREET ADDRESS 44 CITY ST ZIP 5 THUE 5 NAME | ADDITIONS/CHANGES TO OFFI | GERS AND DIRECTORS IN 12 R Change Addition Change Addition Change Addition Change Addition |
| | NAME 62 NAME | SIGNATURE S 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | gnature based or printed have of my closed agree of PD COFFAE, KENNETH P. 630 E. COLONIAL DR. | DELETE DELETE | 13. 1 THUE 12 NAME 13 STREET ADDRESS 14 CITY ST ZIP 2 THUE 22 NAME 23 STREET ADDRESS 24 CITY ST ZIP 3 THUE 32 NAME 33 STREET ADDRESS 34 CITY ST ZIP 4 THUE 42 NAME 43 STREET ADDRESS 44 CITY ST ZIP 5 THUE 5 NAME | ADDITIONS/CHANGES TO OFFI | GERS AND DIRECTORS IN 12 R Change Addition Change Addition Change Addition Change Addition |
| TITLE DESETE 6 1 THUE | | SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP | gnature based or printed have of my closed agree of PD COFFAE, KENNETH P. 630 E. COLONIAL DR. | Cancible Taggeration (SOT NO DIRECTORS DELETE DELETE | 13. 1 THUE 12 NAME 13 STREET ADDRESS 14 CITY ST ZIP 2 THUE 22 NAME 23 STREET ADDRESS 24 CITY ST ZIP 3 THUE 32 NAME 33 STREET ADDRESS 34 CITY ST ZIP 4 THUE 42 NAME 43 STREET ADDRESS 44 CITY ST ZIP 5 THUE 52 NAME 53 STREET ADDRESS 44 CITY ST ZIP 5 THUE 52 NAME 53 STREET ADDRESS 54 CITY ST ZIP | ADDITIONS/CHANGES TO OFFI | GERS AND DIRECTORS IN 12 Change |
| NAME 62 NAME | STREET ADDRESS 63 STREET ADDRESS | SIGNATURE 11. 11. 11. NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | gnature based or printed have of my closed agree of PD COFFAE, KENNETH P. 630 E. COLONIAL DR. | Cancible Taggeration (SOT NO DIRECTORS DELETE DELETE | 13. 1 THUE 12 NAME 13 STREET ADDRESS 14 CITY ST ZIP 2 THUE 22 NAME 23 STREET ADDRESS 24 CITY ST ZIP 3 THUE 32 NAME 33 STREET ADDRESS 34 CITY ST ZIP 4 THUE 42 NAME 43 STREET ADDRESS 44 CITY ST ZIP 5 THUE 52 NAME 53 STREET ADDRESS 44 CITY ST ZIP 5 THUE 52 NAME 53 STREET ADDRESS 54 CITY ST ZIP | ADDITIONS/CHANGES TO OFFI | GERS AND DIRECTORS IN 12 Change |
| STREET ADDRESS 63 STREET ADDRESS | | SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | gnature based or printed have of my closed agree of PD COFFAE, KENNETH P. 630 E. COLONIAL DR. | Cancible Taggeration (SOT NO DIRECTORS DELETE DELETE | 13. 1 THUE 12 NAME 13 STREET ADDRESS 14 CITY ST ZIP 2 THUE 22 NAME 23 STREET ADDRESS 24 CITY ST ZIP 3 THUE 32 NAME 33 STREET ADDRESS 34 CITY ST ZIP 4 THUE 42 NAME 43 STREET ADDRESS 44 CITY ST ZIP 5 TRUE 52 NAME 53 STREET ADDRESS 44 CITY ST ZIP 5 TRUE 52 NAME 53 STREET ADDRESS 54 CITY ST ZIP 6 THUE | ADDITIONS/CHANGES TO OFFI | GERS AND DIRECTORS IN 12 Change |
| | CITY-ST-ZIP 6.4 CITY-ST-7IP | SIGNATURE S 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | gnature based or printed have of my closed agree of PD COFFAE, KENNETH P. 630 E. COLONIAL DR. | Cancible Taggeration (SOT NO DIRECTORS DELETE DELETE | 13. 1 THUE 12 NAME 13 STREET ADDRESS 14 CITY ST ZIP 2 THUE 22 NAME 23 STREET ADDRESS 24 CITY ST ZIP 3 THUE 32 NAME 33 STREET ADDRESS 34 CITY ST ZIP 4 THUE 42 NAME 43 STREET ADDRESS 44 CITY ST ZIP 5 THUE 52 NAME 53 STREET ADDRESS 44 CITY ST ZIP 5 THUE 52 NAME 53 STREET ADDRESS 54 CITY ST ZIP 6 THUE 62 NAME | ADDITIONS/CHANGES TO OFFI | GERS AND DIRECTORS IN 12 Change |

4.1 to hereby certify that the information supplied with this flying is voluntarily turnished and does not quarry for the exemption stated in Section 119.07(3)(s). 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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if quariged, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

6-1096

467-423-7667