	I. Entity Name	MENT # 538024					pr 14, Secret 04-14-2008			
Cost MilliphiON KABU       ADS MilliphiON KABU         ALE Principal Place of Business - No PO. Box #       3. Mailing Audress         Sulla, Apt. 4, etc.       Sulla, Apt. 4, etc.         Orly & Busin       City & Sulla         Dity & Busin       City & Sulla         Zip       Country         Zip       Country         So Bank and Address of Current Registered Agent       7. Name and Address of New Registered Agent         CORPORATION SERVICE COMPANY 1201 HAYS STREET       Select Address of Current Registered Agent         Control agents       7. Name and Address of New Registered Agent         Core Control agents       7. Name and Address of New Registered Agent         Core Control agents       Select Address (P.O. Box Number is Not Acceptable)         Table Address of New Registered Agent       Select Address (P.O. Box Number is Not Acceptable)         Core Control agents       Select Address (P.O. Box Number is Not Acceptable)         Table Address of Decrements of the purpose of changing the registered office or registered agent, or both, it the State of Forda. Tam Remote Number is Not Acceptable)         Signa Tube Registered Agent       This hand Cost Number is Not Acceptable)         Table Address Not Registered Agent       This Address is OrPICERS AND DIRECTORS IN 11.         Signa Tube Registered Agent       This Address is OrPICERS AND DIRECTORS IN 11.		· · · · · · · · ·			TEST P					
Bills Apol. Apol.     20.5 MILLIARON KAPU       ALLERINK Z 2004     ALLERINK R 2 2004       Suite, Apol. 4, etc.     Suite, Apol. 4, etc.       Suite, Apol. 4, etc.     Suite, Apol. 4, etc.       City & Suite     Cluy & Suite       Zip     Coverty       2 proceed Business - No PO. Box #     3. Mailing Audress       Zip     Coverty       2 proceed Business - No PO. Box #     3. Mailing Audress       2 proceed Business - No PO. Box #     3. Mailing Audress       2 proceed Business - No PO. Box #     3. Mailing Audress       2 proceed Business - No PO. Box #     3. Mailing Audress       2 proceed Business - No PO. Box #     3. Mailing Audress       2 proceed Business - No PO. Box #     3. Mailing Audress       2 proceed Business - No PO. Box #     3. Mailing Audress       2 proceed Business - No PO. Box #     3. Mailing Audress       2 proceed Business - No PO. Box #     3. Mailing Audress       2 proceed Business - No PO. Box #     3. Mailing Audress       2 proceed Business - No PO. Box #     3. Mailing Audress       2 proceed Business - No PO. Box #     3. Mailing Audress       2 proceed Business - No PO. Box #     3. Mailing Audress + Apol.       2 proceed Business - No PO. Box #     3. Mailing Audress + Apol.       2 proceed Business - No PO. Box #     3. Mailing Audress + Apol.       2 procee			•			<u>000</u>	0100-			
Suite, ADL #, etc.     Suite, ADL #, etc.     04032008     Chy-P     CR2E034 (12/06)       City & State       Zo     Country     Zo     Country     Zo     Country     S. Centrotice of Status Deared     S. R25 Additional       Zo     Country     Zo     Country     Zo     Country     S. Centrotice of Status Deared     S. R25 Additional       COPPORATION SERVICE COMPANY     Intermediate of Status Deared     Name and Address of New Registered Agent     Name and Address of New Registered Agent     Name and Address of New Registered Agent       CopPORATION SERVICE COMPANY     Status Statement for the purpose of changing its registered agent, or both, in the State of Florida. Tam familiar with and acceptable)     State Address (P D Box Number is Not Acceptable)       Status Address of new Registered agent.     Status Deared     FL     Zo Code       Status Number is Not Acceptable)     This Address of New Registered Agent Agen Agent Agen Agent				AD	2					
City & Site         City & State	2. Principal Pli	ace of Business - No P.O. Box #	3. Mailing Address	<u> </u>	۰ • • • • •					
Zip     Country     Zip     Country     S. Centraceu of Status Device1     S. Status Device1	Suite, Apt. #	#, etc.	Suite, Apt. #, etc.			04032008	Chg-P	CR2E034	\$ (12/06)	
ZIP       Country       Zip       Country       6. Certificate of Status Desired       58.75 Additional Fee Required         CORPORATION SERVICE COMPANY 1201 HAYS STREET       Name and Address of Current Registered Agent       7. Name and Address of New Registered Agent         CORPORATION SERVICE COMPANY 1201 HAYS STREET       Street Address (P O. Box Number is Not Acceptable)         Contry       FL       Zip Code         City       FL       Zip Code         City       FL       Zip Code         City       FL       Zip Code         Street Address (P O. Box Number is Not Acceptable)       City         City       FL       Zip Code         City       FL       Zip Code         Street Address (P O. Box Number is Not Acceptable)       City         Street Address (P O. Box Number is Not Acceptable)       City         Street Address (P O. Box Number is Not Acceptable)       City         Street Address (P O. Box Number is Not Acceptable)       City         Street Address (P O. Box Number is Not Acceptable)       City         Street Address (P O. Box Number is Not Acceptable)       City         Street Address (P O. Box Number is Not Acceptable)       City         Street Address (P O. Box Number is Not Acceptable)       City         Street Address (P O. Box Number is Not Acce	City & State	3	City & State				049	·		· · · · ·
	Zip	Country	Zip	Country			<u> </u>		8.75 Add	litional
CORPORATION SERVICE COMPANY 201 HAYS STREET ALLAHASSEE, FL 32301-2525       Street Address (P.O. Box Number is Not Acceptable)         City       FL       Zip Code         City       FL       Adde to Pees         City       FL       Adde to Pees         City       FL       Adde to Pees         Michacl, Streer Address Streer Address Streer Addre		6. Name and Address of Curr	rent Registered Agent	Name		7. Name and A	ddress of New F		·	
			Y		ddress (P (		is Not Accentable	<u>م)</u>		
The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Fiorda. 1 am familiar with, and accel     the abligations of registered agent.     State of Fiorda. 1 am familiar with, and accel     index agent, or both, in the State of Fiorda. 1 am familiar with, and accel     index agent, or both, in the State of Fiorda. 1 am familiar with, and accel     index agent, or both, in the State of Fiorda. 1 am familiar with, and accel     index agent, or both, in the State of Fiorda. 1 am familiar with, and accel     index agent, or both, in the State of Fiorda. 1 am familiar with, and accel     index agent, or both, in the State of Fiorda. 1 am familiar with, and accel     index agent, or both, in the State of Fiorda. 1 am familiar with, and accel     index agent, or both, in the State of Fiorda. 1 am familiar with, and accel     index agent, or both, in the State of Fiorda. 1 am familiar with, and accel     index agent, or both, in the State of Fiorda. 1 am familiar with, and accel     index agent, or both, in the State of Fiorda. 1 am familiar with, and accel     index agent, or both, in the State of Fiorda. 1 am familiar with, and accel     index agent, or both, in the State of Fiorda. 1 am familiar with, and accel     index agent, or both, in the State of Fiorda. 1 am familiar with, and accel     index agent, state agent, or both, in the State of Fiorda. 1 am familiar with, and accel     index agent, state agent, or both, in the State of Fiorda. 1										
It he above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Lam familiar with, and accer the obligations of registered agent.    SignATURE     SignATURE     SignATURE     FILE NOWILI FEE IS \$150.00     After May 1, 2008 Fee will be \$550.00     0. OFFICERS AND DIRECTORS     11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS     12. Deficient Stress     13. OFFICERS AND DIRECTORS     14. ChAEL, STEVEN J     15. Did beta     16. OFFICERS AND DIRECTORS     17. ST-2P     18. MICHAEL, DORIS H.     18. MICHAEL, STEVEN J     18. MICHAEL, DORIS H.     18. MICHAEL, STEVEN J.				City		• · · · •			Zip Code	e
the abligations of registered agent.  IGNATURE  Signature, food or printed name all registered agent and the el approach  IGNATURE  Signature, food or printed name all registered agent and the el approach  IGNATURE  IGNATURE	The above	named optity submits this stateme	int for the ourpose of changing if			i agent or both	in the State of Fi		miliar with	and acces
PD       PD <th< th=""><th>FILE</th><th>E NOW!!! FEE IS \$150.00</th><th>9. Election Camp</th><th>aign Financing</th><th>\$5.0</th><th>0 May Be</th><th></th><th>DATE</th><th></th><th></th></th<>	FILE	E NOW!!! FEE IS \$150.00	9. Election Camp	aign Financing	\$5.0	0 May Be		DATE		
TIREET AUDRESS       3169 WHISPER WIND DR       SIREET AUDRESS       2635 Millibrook Rd         TIREET AUDRESS       SAINT CLOUD, FL 34771       Citr-S1-2P       Raleigh N C 37604         TIREET AUDRESS       3203 MISTY MORN COURT       TITLE       VP b       Change PAddition         TIREET AUDRESS       3203 MISTY MORN COURT       STREET AUDRESS       2635 Millibrook Rd       Citr-S1-2P         TITLE       V       Poletee       HTLE       VG b       Change PAddition         MICHAEL, STEVEN J.       Poletee       HTLE       Saint CLOUD, FL       Change PAddition         MAME       MICHAEL, STEVEN J.       Poletee       HTLE       Saint CLOUD, FL       Change PAddition         MAME       STICLOUD, FL       Poletee       HTLE       Saint CLOUD, FL       Change PAddition         TITLE       AS       STICLOUD, FL       Citr-S1-2P       Raleigh NC 37604       Change       Addition         TITLE       AS       Statest Audress       Statest Audress       Statest Audress       Citr-S1-2P       Raleigh NC 37604       Change       Addition         TITLE       AS       Statest Audress       Street Audress       Street Audress       Street Audress       Street Audress       Street Audress         TITLE       AS	FILE After Ma	E NOWIII FEE IS \$150.00 ay 1, 2008 Fee will be \$5	9. Election Camp 50.00 Trust Fund Co	aign Financing ntribution.	\$5.0	O May Be i to Fees	HANGES TO OFF		DIRECTOR	 S IN 11
Inte       S       Inte       VP D       Inte       V       Inte       NAME       Street ADDRESS       S371 CROOKED OAK CIRCLE       Inte       NAME       Street ADDRESS       S371 CROOKED OAK CIRCLE       Inte       NAME       Street ADDRESS       S371 CROOKED OAK CIRCLE       Inte       NAME       Street ADDRESS       Street ADDRESS       S371 CROOKED OAK CIRCLE       Inte       NAME       Street ADDRESS       Inte       NAME       Street ADDRESS       Street ADDRESS       Inte       NAME       Street ADDRESS       Inte       NAME       Street ADDRESS       Inte       NAME	FILE After Ma 10.	E NOWIII FEE IS \$150.00 ay 1, 2008 Fee will be \$5 OFFICERS A	9. Election Camp 50.00 Trust Fund Cor AND DIRECTORS	naign Financing ntribution.	\$5.0 Added	0 May Be i to Fees ADDITIONS/C		ICERS AND C		
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ITTLE       V       ITTLE       S       Change       Id Addit         IAME       MICHAEL, STEVEN J.       STI CROCKED OAK CIRCLE       STREET ADDRESS       S371 CROCKED OAK CIRCLE       STREET ADDRESS       GG 35 Nillbrook Rdd       GG 35 Nillbrook Rdd         STRET ADDRESS       STRET ADDRESS       STRET ADDRESS       CITY - ST - ZIP       Ra (a i g 4. N C a 7 6 0 4)       Change       Addit         ITTLE       AS       Delete       TITLE       ITTLE       Change       Addit         IAME       STRET ADDRESS       2635 Millbrook Rdd       Change       Addit         ITTLE       AS       Delete       TITLE       Change       Addit         ITTLE       AS       Delete       TITLE       Change       Addit         ITTLE       AS       Delete       TITLE       Change       Addit         ITTLE       STRET ADDRESS       CITY - ST - ZIP       Change       Addit         ITTLE       Delete       TITLE       Change       Addit         ITTLE       ITTLE       ITTLE       Change       Addit         ITTLE       ITTLE       ITTLE       ITTLE       Change       Addit         ITTLE       ITTLE       ITTLE       ITTLE       ITTLE	FILE Aftor Ma IO. IILE IAME ITREET ADDRESS OITY-ST-ZIP	E NOWIII FEE IS \$150.00 ay 1, 2008 Fee will be \$54 OFFICERS A PD MICHAEL, STEVEN J 3169 WHISPER WIND DR SAINT CLOUD, FL 34771 S	9. Election Camp Trust Fund Con AND DIRECTORS	Paign Financing Intribution.	\$5.0 Added J. Mid 2635 Rale	0 May Be ito Fees ADDITIONS/C charles Ri Hilloro igh NC	1285 04 Rd 27604	FICERS AND D	Change	
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NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 or Block 10 or Block 11	FILE After Ma	E NOWIII FEE IS \$150.00 ay 1, 2008 Fee will be \$59 OFFICERS A PD MICHAEL, STEVEN J 3169 WHISPER WIND DR SAINT CLOUD, FL 34771 S MICHAEL, DORIS H. 3203 MISTY MORN COURT ST CLOUD, FL V MICHAEL, STEVEN J. 5371 CROOKED OAK CIRCL ST. CLOUD, FL AS FELMAN, JAMES 2635 MILLBROOK RD	9. Election Camp Trust Fund Con AND DIRECTORS	Paign Financing ntribution.	\$5.0 Added J. Mid 2635 Rale VPD John 2635 Rale S Rale	0 May Be to Fees ADDITIONS/C charel Ri Hillbro Egt NC Gardnet Millbro igt NC igt NC	vess ok Rd 2 27604 w k Rd 27604 k Rd	FICERS AND C	Change	Additi
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