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Zip Country Zip Country B. This comparison overs the current vare intrangible 221 23 30 Personal Property Tax. Ves No 3. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 10. Name and Address of New Registered Agent 418 STATE ROAD 66 23 Street Address (P.O. Box Number is Not Acceptable) 42 City ESC 24 City ESC 44 City FL 85 Zip Code 44 City ESC Zip Code 25 44 City FL 85 Zip Code 41 Name 28 Street Address (P.O. Box Number is Not Acceptable) 33 43 City FL 85 Zip Code 34 41 City FL 85 Zip Code 34 42 City of	City & State	3		City & State				
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34ptacks OPFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PO □ DELETE 1.1 TITLE □ Change Addition STREET ADDRESS AT9 SUMNER RD 1.3 STREET ADDRESS Addition Addition STREET ADDRESS TTTLE STD Lastreet ADDRESS Change Addition STREET ADDRESS TTTLE Change Addition Change Addition STREET ADDRESS TTTLE Change Addition Change Addition STREET ADDRESS Change Change Addition Change Addition STREET ADDRESS Change Change Addition Change Addition STREET ADDRESS Change Change	office or re agent. I ar SIGNATURE	egistered agent, or both, in the m familiar with, and accept the	State of Florida obligations of, S	Such change was au ection 607.0505, Flori	s, the above-named corp thorized by the corporati da Statutes.	poration submits this statement for the purpose ion's board of directors. I hereby accept the app	of changing its registe	lered ed
III.E DAVIS, LEO II. I. I. MARE DAVIS, LEO II. I. I. MARE II. I. I. I. MARE II. I. I. I. I. MARE II. I.							AND DIRECTORS IN	v 12
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14. 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	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS			🗌 DELÉTE	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 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS		Change	Addition

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IE OF SIGNING OFFICER OR DIRECT MODILINALAL FOOL SIGNATURE AND TYPED OR PRINTED