## 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

Solic Apt #, etc.   Soli	1. Corporation	MENT # 53933 Name MEADOW FERNS, INC.	39 (2)			(486)51 81/80 11/16 48/66 (11/8)		<b>a</b> ll <b>a</b> l <b>a</b> la <b>a</b> l <b>a</b> l	Gell) Gible 1864	
Application			·		.,					
PO BOX 402	Principal Place	of Business	Mailing Address			s idatal attes titta tarae titas ell		/// <b>U/U// U/U/</b>	*****	
2.   A.   A.   A.   A.   A.   A.   A.	PO BOX 402	!	PO BOX 402	12			1			1
Substitution   Subs	Principal Pla	ace of Rusiness	2a Mailinn Address			L	10			-
Supplementary   Supplementar		T) have the second of the seco				59-1754206		ļ	<u> '                                  </u>	-
Coy A State	¬ ' ' '	#, etc.				5. Certificate of Status Desired				
29	City & State	)	City & State						•	
JONES, LARRY W   325 BEASLEY LN   PIERSON FL   32080-0402	Z(ρ		Zip	) ·	ry	8. This corporation has liability for Florida Statutes	[]No	ix under s		-
Street Address (F.O. Fox Number is Not Acceptable)		g. Name and Address of Curr	ent Registered Agent		entrus	10. Name and Address of New F	Registered	Agent		
325 BEASLEY LN   PIERSON FL 32080-0402   58   58   59   59   59   59   59   59				8	1 Nanse					
PIERSON FL 32080-0402				8	2 Street Add	ress (P.O. Box Number is Not Acceptal	<del>Уе)</del>			1
14				8	3					
The provisions of Sections 607,0502 and 607 1508, Florida Statistics, the above-nemed corposation statistics. The statement for the purpose of changing its registered difficency registered agent, or both in the State of Florida. Such change was euthorized by the corporation's broard of directors. Thereby accorpt the appointment as registered agent. Fam. Script and accept the obligations of, Section 607,0505, Florida Statistics.  SIGNATURE  OFFICERS AND DIRECTORS IN 12  12. OFFICERS AND DIRECTORS IN 12  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	PIERSU	N FL 32080-0402					,	- <b>-</b>		
11. Present to the processor of Sections 607.0502 and 607.1506, Flocks Statutes, the above service conjustation statute. It's statement for the purpose of careging its registered office or registered egonal, or both, with 65tate of Flockies, Such change was without one of the company of the appointment as registered agent. Fam created egonal, or both, with 65tate of Flockies, Such additions of Section 607.0505, Florida Statutes.    SCRNATURE				8	4 Oity		FI	85 Zıç	) Code	
12.	SIGNATURE							registered	agent. I am	
STREEL ADDRESS   JONES, LYNNE Y.   22 STREEL ADDRESS   23 STREEL ADDRESS   23 STREEL ADDRESS   24 CTY - 51 - 21P   24 CTY - 52 - 21P   24 CTY -					hort sailteit herkessage			DIRECTO	RS IN 12	- 8
STEEL ADDRESS		T					[	Change	Add tion	5
STEP   ADDRESS   LYNNE Y.   23 SHELL ADDRESS   23 SHELL ADDRESS   23 SHELL ADDRESS   24 CTY - ST - ZP   24 CTY - ST - ZP   25 THEF   2	NAME	,		1.2 NAME						2
STEEL ADDRESS			SLEY	1.3 STRE	ET ADDRESS					١ř
STEP   ADDRESS   LYNNE Y.   23 SHELL ADDRESS   23 SHELL ADDRESS   23 SHELL ADDRESS   24 CTY - ST - ZP   24 CTY - ST - ZP   25 THEF   2	City-St ZiF	<del>+</del>								_ è
STREET ADDRESS   E WASHINGTON & N BEASLEY   23 STREET ADDRESS   24 CTY-SY-ZP	1111.6	<b>U</b> 1					l	Change	Addition	`
CHANGE   DELETE   3 THUE   Change   Addition     NAME   STREET ADDRESS   33 STREET ADDRESS     CHY -ST - ZPP   34 CHY - ST - ZPP     THE   DELETE   4 THUE   Change   Addition     NAME   ADDRESS   ASTREET ADDRESS     CHY -ST - ZPP   Addition     Change   Addition			Of Etc							
DELETE	-		SLEY							
NAME				and the second of the second o				Change	☐ Addition	
STREET ADDRESS   33 STREET ADDRESS   34 CHTY ST-ZIP				3.2 NAM	f			_	<del></del>	
DELETE	STREET ADDRESS			3.3 STH	EET ADDRESS					
NAME	GITY-S" 7P			3.4 CH Y	- ST - ZIP			<u></u>	<u></u>	
STREEL ADDRESS   43 STREEL ADDRESS   44 CHY ST-7IP	1171.		DEFE 1E	4 1 THL	F		l	] Change	☐ Addition	
CHY-S1-7IP	NAME									
TITLE         DELETE         5 1 TITLE         Change         Addition           NAMI         52 NAMI         52 NAMI										
NAME         52 NAME           STREEL ADDRESS         53 STREEL ADDRESS           CITY-S1-ZP         54 CITY-S1-ZP           LTLE         □ DELETE         6 LTITLE           NAME         62 NAME           STREEL ADDRESS         63 STREEL ADDRESS           CITY-S1-ZP         64 CITY-S1-ZIP		<del></del>						C   Change	Addition	
STREET ADDRESS		Florette					1			
DELETE   DELETE   6   Change   Addition     NAME   62   NAME     STREET ADDRESS   63   STREET ADDRESS     C TY-ST-ZP   64   CITY-ST-ZIP										
NAM:         6.2 NAME           STREET ADDRESS         6.3 STREET ADDRESS           C. TY-ST-ZP         6.4 CHY-ST-ZP								Change	Addition	"[
C.1Y-S1-ZIP 64 C.1Y-S1-ZIP				6.2 NAM	IE					
C.TY-ST-ZP 64 CHY-ST-ZIP	STREET ADDRESS			63 S1H	EL ADDRESS					
14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k). Florida Statutes. I further	C-TY-ST-ZP			6.4 City	- 51 - ZIF					

ceruly that the information indicated on this aminda report or suppliemental ambian report is true and econate and that my signature shall have the same eight effect as if made under outly flexible reportation or the receiver or those empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 ff changed, or on an attachment with an address

SIGNATURE:

4/2/98 904 749-4454