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

PROFIT CORPORATION ANNUAL REPORT



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

412 NE 16TH AVE #130 PO BOX 1776 CAMESYILLE FL 32601 412 NE 16TH AVE #130 PO BOX 1776 CAMESYILLE FL 32601 3. Date Preprieted of Qualified Sept October 1776 CAMESYILLE FL 32601 5. Sept Ave 8, etc.				
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412 NE STRIP AVE \$130 PO BOX 1778 GAINESVILLE FL 32601 3. Date procyclated or Quarted 38. Date of Q2/2 2. Principal Place of Electrops				
3. Deale forecasted or Custified 3s. Date of Uniform 3s. Date				
Solid, Act. 6, etc. Solid, Act. 6, etc.	8/1995			
Suite, Ant. #, etc. Suite, Ant. #, etc.	Applied For			
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GAINESVILLE FL 32601 B3				
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I. Pursuant to the provisions of Sections CO7.05:02 and 607.15:08. Fronds Statutes, the above named corporation submits this statement for the purpose of changing or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as regist annullar with, and accept the obligations of Section 607.050, Florida Statutes. GNATURE State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as regist annullar with, and accept the obligations of Section 607.050, Florida Statutes. GNATURE State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as regist annullar with the purpose of changing or registered agent, or both, in the purpose of changing or registered agent, or both, in the state of florida society that the purpose of changing or registered by the corporation's board of directors. I hereby accept the appointment as regist annullar accept the appointment accept accept the appointment accept accept the appointment accept accept the appointmen	Zip Code			
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AS CHAPMAN, LISA S. 412 N.E. 16TH AVE. 51 70° GAINESVILLE FL 6				
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do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the execution stated in Section 110 07/2003. Excited Co	•			
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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 carry, 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				
appears in Block 12 or Block 13 if changed, or on an attachment with an address.	I that my name			