FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00						FILED			
COR	PROFIT CORPORATION		( <del>2</del> )	FLORIDA DEPARTMENT OF STATE  Sandra B. Mortham		Mar 04 1998 8:00an			
1	IAL REPORT		7.7/	ary of State		Secreta	9 <b>13</b> 7	of S	tate
•	1998	TO THE	DIVISION OF	CORPORATIONS		Scorca	ai y	OI D	tate
1. Corporation	MENT # Name Y AGENCY, IN	<b>694442</b> lc.	(5)						
Principal Place	of Business		Mailing Address			ı isadıla ürikle tahiri aralı aralı aralı	ILEI WIEIS WIN	14 M1W14 W1W14 W4W	II 41917 1981
% CHRISTOPI 1016-LABALLI JACKBONVILL		% CHRISTOPHER P WA 1010-LAGALLE-8T: STE JACKSONVILLE-FL-82X	<del>-181</del>		DO NOT WRIT	E IN THIS	SPACE		
						<ol> <li>Date Incorporated or Qualified 07/14/1981</li> </ol>			
	ace of Business		2a. Mailing Address			4. FEI Number		Ap	plied For
	opont Stat	1000 Count	26 6271 DuPost	STATION COU	72	59-2108376			t Applicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 / Fee Re	
City & State		E1	City & State	ille Fl		6, Election Campaign Financing		\$5.00	
I Zip		untry	28 Jacksonu	Country		Trust Fund Contribution  A. This corporation owes or has a	paid the cu	Added t	
24 322	1-41	ÚSA	29 32217	۵۵ مع		Personal Property Tax due Jur	ne 30.	Yes 🛭	¶ No
		dress of Current	Registered Agent	81 Name		10. Name and Address of New F	legistered	Agent	
	VDLEY, CHRISTOI E <del>-101, 1018 LAS</del>					(D.O. D. Al	- 1-1-3		
	OKSONWLLE FL		•	82 Street A	\ooress	s (P.O. Box Number is Not Accept	8018)		
6	521 BOB	TATE 76,6	ION COUNT	83					
4	rchroman	lle FI	32217	84 City	_ · · · · · · · ·		FL	85 Zip	Code
11. Pursuant	to the provisions of	Sections 607.0502	and 607.1508, Florida Statu	ites, the above-named of	corpora	ation submits this statement for the	DUITOGO	of changing if	s registered
agent. I a	m familiar with, and	accept the obligati	ons of, Section 607.0505, F	lorida Statutes.	Marion	's board of directors. I hereby acc	opt the up	politinon ao	rogistorou
SIGNATURE	Signature, typed or printed	name of registered accord	and title it applicable (NC	TE. Registered Agent signature r	required v	when reinstating)	DATE		
12.		OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFF	ICERS AN		S IN 12
TITLE	DP WADLEY, CHI	O GELIGOTES	<b>₩</b> DELETE		DP		^	Change Change	Addition
NAME STREET ADDRESS	101, 1016 LA					der Chriztopher 1 Dugate tropud		υ <b>ω</b> .Τ	
CITY-ST-ZIP	JACKSONVILL					KSONUTILE FI	3251		
TITLE	ST		<b>≥</b> DELETE	2.1 TITLE	ST		_	Change	Addition
NAME	WADLEY, CHI 101, 1016 LA					LEY CHRISTOPHER			
STREET ADDRESS CITY-ST-ZIP	JACKSONVILL			2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP	627	1 BUPONT STATIO	322 322	いたし	
TITLE			DELETE	3.1 TITLE		TO DIN ALTIC		Change	Addition
NAME				3.2 NAME					
STREET ADDRESS				3.3 STREET ADDRESS					
CITY-ST-ZIP TITLE			DELETE	3.4, CITY-SY-ZIP 4.1 TiTLE				Change	Addition
NAME				4. 2 NAME					
STREET ADDRESS				4.3 STREET ADDRESS					
CITY-ST-ZIP		<del></del>	T ocurre	4.4 CITY-ST-ZIP				Change	Addition
TITLE			☐ DELETE	5.1 TITLE				☐ Change	LT MODITION

14. I 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 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 13 if changed, or on an attachment with an address.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

Addition

Change

54 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

DELETE

Bar and the second second

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

+ Charstopher P. Warley 2/28/98 1000 CPU CIGNATURE.