Suite, Apt. #, etc       Suite, Apt. #, etc.       S. Certificate of Status Desired       \$8,75 Additional Fee Required         22       City & State       City & State       City & State       City & State       \$ Certificate of Status Desired       \$ Section Campaign Financing Trues Fund Contribution       \$ Addet to Fees         23       Country       Zip       Country       8. This corporation has liability for intangible tax unders. 199.032, Florida Statutes       > Addet to Fees         24       34 6 9 1 - 43 4 5 25       28       30       Florida Statutes       Yes       No         9. Name and Address of Current Registered Agent       10. Name and Address of New Registered Agent       No       No         2018 US 19 HOLIDAY FL 33660346 9 1 - 434 5       81       Name       82       Street Address (P.O. Box Number is Not Acceptable)         84       City       FL       85       Zip Code         11. Pursuant to the provisions of Sections 607.0502 and 607.1506. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent. I and handar with, and accept the obligations of, Section 607.0505. Florida Statutes.         SignATURE       SignAture required when reinstaing)       DATE         SignAture       Int Mandacorpt the obligations of, S	PF CORP ANNUA	E NOW: FII POFIT PORATION AL REPORT 997	ING FEE AF		RTMENT O B. Morthe ary of State	F STATE M	Apr 08	ILED 1997 8:0 ary of S	
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24)       346 91 - 434 5 23       20       Provide Statutute       Yes       Yes       Yes       Yes         24)       346 91 - 434 5       10. Name and Address of Current Registered Agent       91       Name       10. Name of Address of New Registered Agent         2016 US 19       HOLDAY FL 33669 - 346 91 - 434 5       91       Name       42       Street Address (P.O. Box Number is Net Acceptable)         44       City       FL       55       Zip Code       65         45       City       FL       55       Zip Code         46       City       FL       55       Zip Code         47       Function of Doce agent is on both in the Stine of Houring Vea adhroftee by the corporation's both corporation's both corporation's both proposed of changing is registered agent is not both in the Stine of Houring Vea adhroftee by the corporation's both corporation's both corporation's both corporation's both proposed of changing is registered agent is not both in the Stine of Houring Vea adhroftee by the corporation's both proposed of changing is registered agent is not houring vea adhroftee by the corporation's both proposed of changing is registered agent is not houring vea adhroftee by the corporation's both proposed of changing is registered agent is not houring vea adhroftee by the corporation's both proposed of changing is registered agent is not houring vea adhroftee by the corporation's both proposed of houring is not houring vea adhroftee by the corporation's both proposed of houring is not houring vea adhroftee by the corporation's both proposed of houring is no				8					
S. Name and Address of Current Registered Agent     StatAFIA, F. EILEN     2018 US 19     HOLIDAY FL 39669-34691-4345     Street Address (P.O. Box Numbor is Not Acceptable)     B     B     City     FL     SE     Street Address (P.O. Box Numbor is Not Acceptable)     B     Street Address of New Registered Agent     Street Address (P.O. Box Numbor is Not Acceptable)     B     Street Address of Control (Processed Address (P.O. Box Numbor is Not Acceptable)     B     Street Address (P.O. Box Numbor is Not Acceptable)     B     Street Address of Control (Processed Address (P.O. Box Numbor is Not Acceptable)     S     Street Address of Control (Processed Address (P.O. Box Numbor is Not Acceptable)     S     Street Address of Control (Processed Address (P.O. Box Numbor is Not Acceptable)     S			· · · ·			itry	· · ·		s. 199.032,
SOLV V, F. JOLELY         2018 US 19 HOUDAY FL 33669 - 34691 - 4345         40         41         42         43         44         45         45         46         47         48         49         40         40         41         42         43         44         45         46         47         48         49         40         40         41         42         43         44         44         45         45         45         46         47         47         48         49         49         49         49         40         40         40         40         40         41         42         44         44         45         45		9. Name and Add							
HOLIDAY FL 436569 - 34691 - 4345         Notice of colspan="2">Notice colspan="2"         Notice colspan="2"							·····		
84 City         E         52 /2 Code           11. Pursuant to the previsions of Sections 607.0502 and 607.1506. Florida Statutes, the above-named corporation submits this statement for the purpose of the appointment as 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 registered agent area displant ob. Soc. Florida Statutes.           SIGNATURE           Signature registered agent area displant ob. Soc. Florida Statutes.           SIGNATURE           SIGNATURE           VTD         DIFECTORS         INOTE Populate registered agent agents of the corporation is board of directors. I hereby accept the appointment as registered agent agents of the corporation's board of directors. I hereby accept the appointment as registered agent agents of the corporation's board of directors. I hereby accept the appointment as registered agent agents registered agent	HOLID	NAY FL <del>33500</del> ~3	84691-4345	5		82 Street Add	Iress (P.O. Box Number is Not Accep	table)	
II. Pursuant to the provisions of Socions 607 0508 Florida Statutes, the above harned corporation submits this statement for the purpose of banding its registered agent, or both, in the State of Florida Statutes. The expression of advective to the sepolation of Socions Board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida Statutes. The expression of Socions Board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida Statutes. In the expression purpose provisions directores and accept the object agent agent and mile registered agent a						B3			
office or registed agent, or both, with the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the happointment as registered agent and accept the objection. Statutes.         SIGNATURE       Imagent i and accept the objection. Statutes.         SIGNATURE       Example or provide agent					ľ	84 City		FL 85 Zip	Code
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KMAR       SALAFIA, ELLEEN F.       12 NAME         SIMET ADDRESS       2018 US 19       13 STREET ADDRESS         TILE       PD       DELETE       21 TILE         NAME       SALAFIA, JAMES P.       23 STREET ADDRESS         SIMET ADDRESS       2018 US 19       23 STREET ADDRESS         CIVE ST. AP       HOLIDAY, FL.000000-34 69 1 - 43 45       23 STREET ADDRESS         CIVE ST. AP       2018 US 19       23 STREET ADDRESS         CIVE ST. AP       DELETE       31 TITLE         TILE       DELETE       31 STREET ADDRESS         CIVE ST. AP       DELETE       41 TITLE         IN E       DELETE       41 TITLE         STREET ADDRESS       42 NAME         STREET ADDRESS       44 CTVE ST- 2P         IN E       DELETE       51 TITLE         STREET ADDRESS       53 STREET ADDRESS         CIVE ST. AP       DELETE       51 TITLE         IN E       DELETE       51 TITLE         STREET ADDRESS       GSTREET ADDRESS         CIVE ST. AP	}	VTD	OFFICERS AND DI				ADDITIONS/CHANGES TO OF		C
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	information	indicated on this a cer or director of the	nnual report or supple e corrogration or the	emental annual report is	true and a	ccurate and that	at my signature shall have the same le	egal effect as it made ur	nder oath; that
SIGNATURE: 5.6.01.11X/////////////////////////////////	appears in	Block 12 or Block	$\sim$ .	~		un kent			
	SIGNATU	IRE:					4-1-97 Date	813-734-8	163