CORPO ANNUA	OFIT ORATION L REPORT *		AORID.	FLORIDA DEPARTMENT OF STATE Sandra B Mortham Secretary d'State DIVISION OF CORPORATIONS							
DOCUMENT # 697971					(O)						
, Corporation N	S PROPERTY	CARE, INC.									
Principal Place of 5701 BLOUNT SARASOTA FL	AVE		570	g Address XI BLOUNT AVE RASOTA FL 34231-1	3305			1831	OI 1481 BIB31 OI	Off Andri Blads D	
								<ol> <li>Date Incorporated or Qualified 08/06/1981</li> </ol>		e of Last Rep <b>)4/06/199</b>	
Principal Place	e of Business			ailing Address				4. FEI Number 59-2085911		<u> </u>	oplied For ot Applicable
Suite, Apt. #,	etc.		$\vdash$	uite, Apt. #, etc.	.u			Certificate of Status Desired		\$8.75	Additional equired
City & State			27 C 28	ity & State				Election Campaign Financing     Trust Fund Contribution			May Be to Fees
Zip	25	ountry	29	p	30 Co	intry		8. This corporation has liability for Florida Statutes Ye  10. Name and Address of New	s 🔲 No		199.032,
SARASO  1. Pursuant to or registered	d agent, or both, I	Sections 607.0502 a n the State of Florida obligations of, Section	, auch c	панде маз айтгон	Secretary in te	84 City ove named corporation's	orporat board	ion submits this statement for the p of directors. I hereby accept the ap	Fil urpose of cl pointment a	ancino its re	Code egistered offic agent I anı
SIGNATURE	unature. Uned no printed	s name of registered agent are	ាសេខី៤ឧស	iroabiie (N	DE Begistere	at Agent signature	fequaed <b>v</b>	फेल्ट (स्वाद्धानमाद्धी	DA <sup>7</sup> t		····
12.	9,000	OFFICERS AND		ORS	13		т	ADDITIONS/CHANGES TO OF	FICERS AN	ID DIRECTO	RS IN 12
TITLE NAME STREET ADDRESS	P TIMMINS, HA 5701 BLOUN SARASOTA	IT AVE		☐ DELETE	12	THEE NAME STREET ADDRESS				Change	Addit-on
CITY-ST-ZIP TITLE NAME	ST TIMMINS, PI	TYLLIS J		☐ DELETE	2 1	CHY-ST-ZIF TITLE NAME				Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP	5701 BLOUN SARASOTA					STREET ADORESS CITY - ST - ZIP					
NAME STREFT ADDRESS	VP WENDELL T 2305 ZITO C	COURT		DELETE	3 2 3 3	TITLE NAME STREET ADDRES:	57	almidland Rd.	•	<b>Z</b> Change	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS	SARASOTA	řl		☐ DELETE	4 4 2	CITY+ST-ZIP THILE NAME STREET ADDRESS		musota, Fl. 3923		Crange	Addition
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CITY-ST-ZIP TITLE NAME STREET ADDRESS				☐ DELETE	6	CHY-ST-ZIP  TITLE : NAME  STREET ADDRES	5	1000017 -04/15/960 ***200.00			Addition H-15

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 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 12 or Block 13 if changed, or on an attachment with an address.

6.4 CITY - ST - ZIF

STREET ADDRESS

SIGNATURE: Warrey & Jensonin HARY EY D TIMMINS

2-20-96 941-923-1514