1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 704947

THE GREATER DUNEDIN CHAMBER OF COMMERCE, INC.

Principal Place of Business

Mailing Address

FILED Feb 22, 1999 8:00 am Secretary of State

02-22-1999 90065 037 ****61.25

22	DINEON 34698 2. Principal Place of Business 2. Suits Apt. 4, etc. Sui	1 sincipal Claus	o or Eddings				4 16 W 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	A(A)) A(A)(A)A() A(A)	O 010014044
2. Principal Place of Business 2a. Mailing Address 28 3. Date Proxported of Qualified 12/18/1962	2. Principal Place of Business 2a. Mailing Address 2b. Mailing Address 2c. Mailing	301 MAIN ST	19	301 MAIN ST					
Suite, Apt. #, etc.	Sulfa, Apt. #, etc.	DUMEDIM 3403	10	DUNEDIN 34030				DIDIK DIDIK DIDIK DIDIK DIB	1011 1001
Suite, Apt. #, etc. 2	Sulfa, Apt. #, etc.								
Suite, Apt. #, etc. 2	Sulfa, Apt. #, etc.								
Sulle, Apt. #, etc. Sulle, Apt. #, etc. 27 Sulle, Apt. #, etc. 27 Sulle, Apt. #, etc. 27 Sy State Sy University Sy	Sulfe, Apt. #, etc. Sulfe, Apt. #, etc.	2. Principal Pl	ace of Business	2a. Mailing Address	2a. Mailing Address				
Solite, Apt. #, etc. Solite, Apt. #, etc.	Suite. Apt. F. etc. Suite. Apt. F. etc. Suite. Apt. F. etc. Spy0587209 Applied For Syy0587209 Not Applicables Syy0587209 Not Applicable Syy0587209 Not	21		26			12/18/1962		
Some content of the provisions of Sections 617 0502 and 617 1506 Florida Statutes. The purpose of Changing is registered agent. I am familiar with, and accept the obligations of, Section 617 0502, Florida Statutes. The purpose of Pricers And Directors? Some content of the purpose of Changing is registered agent. I am familiar with, and accept the obligations of, Section 617 0502, Florida Statutes. SIGNATURE Signature, ipped or primed rare of registered agent, or both, in the State of Florida Statutes, the abover-aremad corporation submits this statement for the purpose of Changing is registered agent. I am familiar with, and accept the obligations of, Section 617 0502, Florida Statutes. SIGNATURE Signature, ipped or primed rare of registered agent, or both, in the State of Florida Statutes, the abover-aremad corporation submits this statement for the purpose of Changing is registered agent. I am familiar with, and accept the obligations of, Section 617 0502, Florida Statutes. SIGNATURE Signature, ipped or primed rare of registered agent, or both, in the State of Florida Such change was authorized by the corporations board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 617 0502, Florida Statutes. SIGNATURE Signature, ipped or primed rare of registered agent, or both, in the State of Florida Such change was authorized by the corporations board of directors. I hereby accept the appointment as registered agent, and the purpose of changing is registered agent. I am familiar with, and accept the obligations of, Section 617 0502, Florida Statutes. SIGNATURE Signature, ipped or primed rare of registered agent, or both, in the State of Florida Such change was authorized which which the specific of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida Such change was authorized which which the purpose of changing is registered agent. I am familiar with the purpose of changing is registered agent. I am fam	City & State						4. FEI Number	App	lied For
City & State City & State City & City	City & State City & State 28 28 29 20 20	_					59-0587209	_ Not	Applicable
26 Zip Country Zip Country Zip Country 6. Election Campaign Financing \$5.00 May Be Added to Fees Standard Status Session Standard Status Session Statu	Zip							\$8.75 A	dditional
Zip Country Zip Country S.Election Campaign Financing \$5.00 May Be Added to Fees S. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 10. Name and Name 10. Name and Name 10. Name and Name 10. Na	Zip Country 2p 30 Country 6. Election Campaign Financing S\$5.00 May 8e Added to Fees 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 10. Name 10. Name and Address of New Registered Agent 10. Name 10. Name and Address of New Registered Agent 10. Name 10. Name and Address of New Registered Agent 10. Name 10. N			⊢ '			5. Certificate of Status Desired	Fee Red	quired
BELLAVANCE, ROBERT E 301 MAIN ST DUNCEINF I, 34698 11. Pursuant to the provisions of Sections 617,0502 and 617,1508. Florida Statules, the above-named corporation submits this statement for the purpose of changing its registered agent, and the provisions of Sections 617,0502 and 617,1508. Florida Statules, the above-named corporation submits this statement for the purpose of changing its registered agent, and the provisions of Sections 617,0502 and 617,1508. Florida Statules, the above-named corporation submits this statement for the purpose of changing its registered agent, and the provisions of Sections 617,0502 and 617,1508. Florida Statules, the above-named corporation submits this statement for the purpose of changing its registered agent, and the provisions of Sections 617,0503. Florida Statules. Statules agent, and the provisions of Sections 617,0503. Florida Statules. Statules agent, and the provisions of Sections 617,0503. Florida Statules. The above-named corporation submits this statement for the purpose of changing its registered agent, and the provisions of Sections 617,0503. Florida Statules. The above-named corporation submits this statement for the purpose of changing its registered agent. Agent sections board of directors. I hereby accept the appointment as registered agent. Agent sections board of directors. I hereby accept the appointment as registered agent. Agent sections board of directors. I hereby accept the appointment as registered agent. Agent sections board of directors. I hereby accept the appointment as registered agent. Agent sections board of directors. I hereby accept the appointment as registered agent. Agent sections board of directors. I hereby accept the appointment as registered agent. Agent sections board of directors. I hereby accept the appointment as registered agent. Agent sections board of directors. I hereby accept the appointment as registered agent. Agent sections board of directors. I hereby accept the appointment as registered agent. Agent sections agent. Agent	25		Country		Country		6. Election Campaign Financing —	\$5.00	May Be
9. Name and Address of Current Registered Agent BELLAVANCE, ROBERT E 301 MAIN ST DUNEDIN FI. 34698 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zip Code 86 City FL 86 Street Address (P.O. Box Number is Not Acceptable) 87 City FL 88 Street Address (P.O. Box Number is Not Acceptable) 88 City FL 89 Street Address (P.O. Box Number is Not Acceptable) 89 City FL 80 Cit	Section 1.5 Signature 1.5 Name 1	`		Ь	,		,		
BELLAVANCE, ROBERT E 301 MAIN ST DUNEDIN FL 34698 182 Street Address (P.O. Box Number is Not Acceptable) 183 Street Address (P.O. Box Number is Not Acceptable) 184 City FL 85 Zip Code 185 Address (P.O. Box Number is Not Acceptable) 185 Street Address (P.O. Box Number is Not Acceptable) 186 Address (P.O. Box Number is Not Acceptable) 187 FL 85 Zip Code 187 Address (P.O. Box Number is Not Acceptable) 188 Address (P.O. Box Number is Not Acceptable) 189 Address (P.O. Box Number is Not Acceptable) 189 Address (P.O. Box Number is Not Acceptable) 180 Address (P.O. Box Number is Not Acceptable) 181 Address (P.O. Box Number is Not Acceptable) 182 Address (P.O. Box Number is Not Acceptable) 182 Address (P.O. Box Number is Not Acceptable) 183 Address (P.O. Box Number is Not Acceptable) 184 Address (P.O. Box Number is Not Acceptable) 185 Address (P.O. Box Number is Number	BELLAVANCE, ROBERT E 301 MAIN ST DUNEDIN FL 34698 82 Street Address (P.O. Box Number is Not Acceptable) 11. Pursuant to the provisions of Sections 617.0502 and 617.1506, Florida Statutes, the adversary of circular or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of circular, in the provision's to accept the appointment as registered agent, are familiar with, and accept the obligations of, Section 617.0502, Florida Statutes, the authorized by the corporation's board of circular, in the provision's to are familiar with, and accept the obligations of, Section 617.0502, Florida Statutes, the composition's board of circular, in the provision's department as registered agent, are familiar with, and accept the obligations of, Section 617.0502, Florida Statutes, the corporation's board of circular, in the state of Florida. Such change was authorized by the corporation's board of circular, in the state of Florida. Such change was authorized by the corporation's board of circular, in the state of Florida Statutes, and the state of Florida Statutes, the corporation's board of circular, in the state of Florida Statutes, the corporation's board of circular, in the state of Florida Statutes, and the state of					_		stered Agent	
301 MAIN ST DUNEDIN FL 34698 11. Pursuant to the provisions of Suctions 617.0502 and 617.1509. Florida Statutes. The above-named corporation submits this statement for the purpose of changing its 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 accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE CD OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. NAME 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. NAME 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. NAME 12. NAME 12. NAME 12. NAME 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. NAME 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. NAME 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. NAME 13. NAME 12. NAME 12. NAME 13. NAME 13. NAME 14. CITY ST. 2P 12. NAME 12. NAME 13. NAME 14. CITY ST. 2P 14. CITY ST. 2P 15. NAME 16. CITY ST. 2P 17. NAME 18. NAME 18. NAME 19. NAME 19	301 MAIN ST DUNEDIN FL 34698 83 State Sta		or (deline and Addition or sometime		81	Name			
301 MAIN ST DUNEDIN FL 34698 11. Pursuant to the provisions of Suctions 617.0502 and 617.1509. Florida Statutes. The above-named corporation submits this statement for the purpose of changing its 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 accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE CD OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. NAME 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. NAME 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. NAME 12. NAME 12. NAME 12. NAME 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. NAME 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. NAME 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. NAME 13. NAME 12. NAME 12. NAME 13. NAME 13. NAME 14. CITY ST. 2P 12. NAME 12. NAME 13. NAME 14. CITY ST. 2P 14. CITY ST. 2P 15. NAME 16. CITY ST. 2P 17. NAME 18. NAME 18. NAME 19. NAME 19	301 MAIN ST DUNEDIN FL 34698 83 State Sta								
DUNEDIN FL 34698 83	DUNEDIN FL 34698 84		•		82	Street Addre	ess (P.O. Box Number is Not Acceptable)		
Bat City FL Bst Zip Code	Ball City FL Ball City	301 MAIN	ST		92				
TIPE CED CFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TIPE CED CHILL, PAULETTE CONSTRUCTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TIPE CD CHILL, PAULETTE CONSTRUCTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TIPE CD CONSTRUCTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TIPE CD CONSTRUCTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TIPE CD CONSTRUCTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TIPE CD CONSTRUCTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TIPE CD CONSTRUCTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TIPE CD CONSTRUCTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TIPE CD CONSTRUCTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TIPE CD CONSTRUCTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TIPE CD CONSTRUCTORS 13. STREET ADDRESS 2424 Enterprise Rd P.O. Box 14358 TIPE CD CONSTRUCTORS 13. STREET ADDRESS 13. STREET ADDRESS 14. GCTV-51-2P DUNEDIN FL 34698 12. ACCTV-51-2P DUNEDIN FL 34698 13. STREET ADDRESS 17757 US 19 SUITE 660 CITY-51-2P DUNEDIN FL 34698 14. CCTV-51-2P TIPE DO COLERT 13. STREET ADDRESS 17757 US 19 SUITE 660 14. CCTV-51-2P TIPE DO COLERT 14. TIPE COLOR 14. CCTV-51-2P TIPE DO COLERT 15. TIPE COLOR 14. CCTV-51-2P TIPE DO COLERT 15. TIPE COLOR 14. CCTV-51-2P TIPE DO COLOR 15. STREET ADDRESS 14. CCTV-51-2P DUNEDIN FL 34698 14. CCTV-51-2P DUNEDIN FL 3469	The pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-parmed corporation submits this statement for the purpose of changing its registered office 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 registered office or registered agent, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS IN 12 TITLE CED DELETE 11 TITLE CHILD ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE CED DELETE 11 TITLE CHILD ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE CD DELETE 11 TITLE CHILD ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE CD DELETE 11 TITLE CHILD ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE CD DELETE 11 TITLE CHILD ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE CD DELETE 11 TITLE CHILD ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE CD DELETE 11 TITLE CHILD ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE CD DELETE 11 TITLE CHILD ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE CD DELETE 11 TITLE CHILD ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE CD DELETE 11 TITLE CHILD ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE CD DELETE 11 TITLE CHILD ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE CD DELETE 11 TITLE CHILD ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE CD DELETE 11 TITLE CHILD ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE CD DELETE 11 TITLE CHILD ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE CD DELETE 11 TITLE CHILD ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE CD DELETE 11 TITLE CHILD ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE CD DELETE 11 TITLE CHILD ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE CD DELETE 11 TITLE CHILD ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE CD DELETE 11 TITLE CHILD ADDITIONS/CHANGES	DUNEDIN	FL 34698		63				
11. Pursuant to the provisions of Sections 617 0502 and 617 1508, Florida Statutes. The above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized were authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and many of registered agent and many of registered agent and title if applicable. Interest	11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes. The above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Submit and accept the obligations of, Section 617,0503, Florida Statutes. SIGNATURE Section 117,0502 and 617,0503 10,0003, Florida Statutes. 12,000 12,0003, Florida Statutes. 12,000				84	City		85 Zip C	ode
office or registered agent, or both, in the State of Florias. Such Change was authorized by the Corporation's Bush of Influency accept the appointment as registered agent and file if approach. 12	office or registered agent, or both, in the State of Florias. Such change was authorized by the corporation's useful of unitercity's receipt the epipolithis as registered agent, or both, in the State of Florias. Such change was authorized by the corporation's useful of unitercity's receipt the epipolithis as registered agent and site if applicable. Command								
Signature Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signifutor required when reinitating)	SIGNATURE Signature, typed or proted name of regulared agent and life if appreciable (NOTE: Regulared Agent signature regulared when reinstating)	11. Pursuant	to the provisions of Sections 617.0502	and 617.1508, Florida Statutes, the	he above	e-named corpo	eration submits this statement for the purp	oose of changing its	registered iistered
Signature Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signifutor required when reinitating)	SIGNATURE Signature, typed or proted name of regulared agent and life if appreciable (NOTE: Regulared Agent signature regulared when reinstating)	office or re agent. La	egistered agent, or both, in the State o m familiar with, and accept the obligati	ns of, Section 617.0503, Florida	Statutes	ine corporation.	is board of directors. Thereby accept the	s appointment do reg	12.0.00
Signature, typed or printed name of registered agent signature required when intributing in approximate required when intributing in approximate required when intributing in a proximate required when intributing intributing intributing in a proximate required when intributing intributing intributing intributing into a part of the proximate required when intributing intributing intributing into a part of the proximate required when intributing intribution i	13								ļ
TITLE	TITLE	SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Regis	stered Ager	t signature required			
THE	MAKE CET	12.	OFFICERS AND	DIRECTORS	13.				
STREET ADDRESS STRE	STREET ADDRESS S5321 US HWY 19	TITLE	CED	☐ DELETE	1.1 TITLE	Chr	cm .	XX Change	☐ Addition
STREET ADDRESS 25321 US HWY 19	STREET ADDRESS CITY-ST-ZIP PALM HARBOR FL 34684 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP CLearWater, FT 33766-4358 1.4 CITY-ST-ZIP ClearWater, FT 33764 1.4 CITY-ST-ZIP ClearWater, FT 33766-435	NAME	HILL PAULETTE		1.2 NAME	1			
CITY-ST-ZIP	CITY-ST-ZIP	STREET ADDRESS			1.3 STREET	ADDRESS 242	24 Enterprise Rd P.C). Box 14358	3 1
DELETE 21 TITLE CD	TITLE CD								
NAME MACKENZIE, G. MICHAEL 22 NAME STREET ADDRESS 1361 SAGO COURT 23 STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698 2.4 CITY-ST-ZIP TITLE ADD MACKENZIE, G. MICHARD 3.1 TITLE NAME DAVID, RICHARD 3.2 NAME STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 33764 3.4 CITY-ST-ZIP TITLE D DELETE 4.1 TITLE VP NAME KLEIN, CHARLES 4.2 NAME 4.2 NAME STREET ADDRESS 249 MAIN ST 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP TITLE DUNEDIN FL 34698 4.4 CITY-ST-ZIP MACKENZIE, CHARLES Addition STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698 ACKENTY-ST-ZIP	NAME MACKENZIE, G. MICHAEL 22 NAME 23 STREET ADDRESS 1361 SAGO COURT 23 STREET ADDRESS 24 CITY-ST-ZIP 24 CITY-ST-ZIP 24 CITY-ST-ZIP 25 CITY-ST-ZIP 25 CITY-ST-ZIP 25 CITY-ST-ZIP 25 CITY-ST-ZIP 25 CITY-ST-ZIP 26 CITY-ST-ZIP 27 Change Addition					· <u></u>	a water, FL 277W = 17	☐ Change	Addition
STREET ADDRESS 1361 SAGO COURT	STREET ADDRESS 1361 SAGO COURT DUNEDIN FL 34698 2.4 CITY-ST-ZIP DUNEDIN FL 34698 2.4 CITY-ST-ZIP Change Addition			_					
DUNEDIN FL 34698 2.4 CITY-ST-ZIP	CITY-ST-ZIP	İ		1				•	•
TITLE	TITLE	STREET ADDRESS				1		•	
NAME DAVID, RICHARD 3.2 NAME 3.2 NAME 3.2 NAME 3.3 STREET ADDRESS 17757 US 19 SUITE 660 3.4 CITY-ST-ZIP TITLE D	NAME DAVID, RICHARD 32 NAME 32 NAME 32 NAME 32 NAME 33 STREET ADDRESS 17757 US 19 SUITE 660 33 STREET ADDRESS 34 CITY-ST-ZIP CLEARWATER FL 33764 34 CITY-ST-ZIP TITLE D					ST-ZIP		Change	☐ Addition
STREET ADDRESS 17757 US 19 SUITE 660 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP TITLE D	STREET ADDRESS 17757 US 19 SUITE 660 3.3 STREET ADDRESS CITY-ST-ZIP		,	-					
CITY-ST-ZIP CLEARWATER FL 33764	CITY-ST-ZIP	NAME		3		{			1
TITLE D DELETE 4.1 TITLE VP DELETE 4.1 TITLE VP DELETE 4.1 TITLE VP DELETE 4.2 NAME STREET ADDRESS 249 MAIN ST 4.3 STREET ADDRESS DUNEDIN FL 34698 4.4 CITY-ST-ZIP TITLE PCEO DELETE 5.1 TITLE PCEO DELETE 5.2 NAME STREET ADDRESS 2339 DEMARET DR. 5.3 STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698 DELETE 6.1 TITLE REPORTED DUNEDIN FL 34698 DELETE 6.1 TITLE NAME DELETE 6.1 TITLE RAME Ann Paxton	TITLE D	STREET ADDRESS	17757 US 19 SUITE 660	J	3.3 STREE	TADDRESS .			
NAME KLEIN, CHARLES 249 MAIN ST 240 MAIN S	NAME KLEIN, CHARLES 4.2 NAME 4.3 STREET ADDRESS 249 MAIN ST 4.3 STREET ADDRESS 249 MAIN ST 4.4 CITY-ST-ZIP DUNEDIN FL 34698	CITY-ST-ZIP	CLEARWATER FL 33764			T-ZIP			[7] A 3.00
NAME KLEIN, CHARLES 4.2 NAME 4.3 STREET ADDRESS 249 MAIN ST 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP DUNEDIN FL 34698 4.4 CITY-ST-ZIP	NAME KLEIN, CHARLES 4.2 NAME	TITLE	D	☐ DELETE	4.1 TITLE	l v	rp	⊠ Change	☐ Addition
STREET ADDRESS 249 MAIN ST	STREET ADDRESS 249 MAIN ST	NAME	KLEIN, CHARLES		4. 2 NAME	į '	-		
CITY-ST-ZIP DUNEDIN FL 34698 4.4 CITY-ST-ZIP TITLE PCEO □ DELETE 5.1 TITLE NAME BELLAVANCE, ROBERT E 5.2 NAME STREET ADDRESS 2339 DEMARET DR. 5.3 STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698 5.4 CITY-ST-ZIP TITLE □ DELETE 6.1 TITLE TR □ Change Addition NAME Ann Paxton □ Change Addition	CITY-ST-ZIP DUNEDIN FL 34698 4.4 CITY-ST-ZIP TITLE PCEO DELETE 5.1 TITLE NAME BELLAVANCE, ROBERT E 5.2 NAME STREET ADDRESS 2339 DEMARET DR. 5.3 STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE TR NAME Ann Paxton	STREET ADDRESS	l ·]	4.3 STREE	T ADDRESS]
TITLE PCEO DELETE 5.1 TITLE 5.2 NAME NAME BELLAVANCE, ROBERT E 5.2 NAME STREET ADDRESS 2339 DEMARET DR. 5.3 STREET ADDRESS CITY-ST-ZIP TITLE DUNEDIN FL 34698 DELETE 6.1 TITLE NAME 6.2 NAME Ann Paxton	TITLE	!		İ	4.4 CITY-S	T-ZIP			
NAME BELLAVANCE, ROBERT E 52 NAME STREET ADDRESS 2339 DEMARET DR. 5.3 STREET ADDRESS CITY-ST-ZIP TITLE NAME DELETE 6.1 TITLE NAME Ann Paxton	NAME BELLAVANCE, ROBERT E STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698 DELETE DELETE AAME 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE NAME Ann Paxton			☐ DELETE	5.1 TITLE			Change	☐ Addition
STREET ADDRESS CITY- ST-ZIP DUNEDIN FL 34698 DELETE NAME 5.3 STREET ADDRESS 5.4 CITY- ST-ZIP 6.1 TITLE TR Change Ann Paxton	STREET ADDRESS CITY-ST-ZIP DUNEDIN FL 34698 DULETE DELETE Ann Paxton 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP TR Change Ann Paxton				5.2 NAME	-			
STREET AUDINES SA CITY-ST-ZIP SA C	CITY-ST-ZIP DUNEDIN FL 34698 5.4 CITY-ST-ZIP TITLE NAME DELETE 5.4 CITY-ST-ZIP 6.1 TITLE R2 NAME Ann Paxton		· ·	1	5.3 STREE	ADDRESS			
DELETE 6.1 TITLE NAME DELETE 6.1 TITLE TR Change Ann Paxton	TITLE NAME DELETE 6.1 TITLE Factor Change Ann Paxton Change Addition				5.4 CITY-S	T-ZIP			
NAME 62 NAME Ann Paxton	NAME 62 NAME Ann Paxton		DUNLUM I L U1030)	☐ Change	Addition
NAME ANN PAXION	Ann Paxton			, J				•	
■ 63 STREET ADDRESS (O. O. o. c. o. o.	STREET ADDRESS 249 Main St. 34698							·.	ļ
STREET ADDRESS 249 Main St. 34609		STREET ADDRESS				7 710 24	49 Main St.		

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:



BELLAVANCE 1-13-99

727/733-3197