	FILE NOW: FI	LING FEE IS \$6	1.25		
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DOCU	MENT # 7113		, and the second		
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Principal Place of Business 15518 SW OSCEOLA ST. INDIANTOWN FL 34956 US		Mailing Address P.O. BOX 602 INDIANTOWN FL 34956			
08		US		3. Date Incorporated or Qualified 08/23/1966	3a. Date of Last Report 04/24/1995
2. Principal P	lace of Business	2a. Mailing Address 26		4. FEI Number 59-2058229	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	Če .	City & State		Election Campaign Financing Trust Fund Contribution	S5.00 May Be Added to Fees
Žip 4	Country 25	Zip 29	Country	B. This corporation has liability for Florida Statutes	Yes No
	9. Name and Address of Cu	rrent Registered Agent	81 Name	10. Name and Address of New	Registered Agent
	ON, BECKY		82 Street	Address (P.O. Box Number is Not Accept	able)
	N HOPWOOD AVE. TOWN FL 34956				
			83		
•			83 84 City		85 Zip Code
•	to the provisions of Sections 617.0	0502 and 617.1508, Florida Statut	84 City	orporation submits this statement for the p	FL
11. Pursuant or registe	to the provisions of Sections 617.0 red agent, or both, in the State of l rith, and accept the obligations of, t	0502 and 617.1508, Florida Statut Florida. Such change was authoriz Section 617.0503, Florida Statutes	64 City es, the ab ve-named cand by the honoration'	orporation submits this statement for the p board of directors. I hereby accept the ap	FL
11. Pursuant or registe familiar w	to the provisions of Sections 617.0 red agent, or both, in the State of fifth, and accept the obligations of, Signature, typed or printed name of registered	Section 617.0503, Florida Statutes	84 City les, the above-named corporation's	s board of directors. I hereby accept the appropriate the appropriate the property of the prop	purpose of changing its registered office pointment as registered agent. I am
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SIGNATURE: Description Common Dot Carmon 2/13/96 (407) 697-2/84