## **2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

## **DOCUMENT # 723029**



FILED Apr 01, 2004 8:00 am Secretary of State

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| THE PACE AND DIRECTORS   Delete   THE NAME   Delete   THE NAME   DELECTOR   Delete   THE NAME   DELECTOR   Delete   THE NAME   DELETE   DE   | 1. Entity Name SAINT STEPHEN'S CHURCH |  |                                       |                                |                |                   |          |  | 04-01       | -2004    | 9003  | 33 U3  | , / ****** | "61. <sub>2</sub> | 25          |
|--|---------------------------------------|--|---------------------------------------|--------------------------------|----------------|-------------------|----------|--|-------------|----------|-------|--------|------------|-------------------|-------------|
| Suite, Apt. #, etc.    Suite, Apt. #, etc.   Suite, Apt. #, etc.   Suite, Apt. #, etc.   City & State   City & State   City & State   City & State   A. FEI Number   Sp.128207   Applied for   Mort Applicable   Sp.128207   Mort Applicable   Mort Applicab   | 5326 CHARL                            | ES STREET  |                                       | 5326 CHARLES STREET            |                |                   |          |  |             |          |       |        |            |                   |             |
| City & State  City & State  City & State  City & State  A PER Number of S9-1282207  A POPULATION OF SP-1282207  A POPULATION OF SP-1282207  A POPULATION OF STATE Additional Few Proquinds  B. Certificate of Status Desired   \$3.75 Additional Few Proquinds   \$4.75 Ad | 2. Principal P                        | lace of Busin  | ess                                   | 3. Mailing Address             |                |                   |          |  |             |          |       |        |            |                   |             |
| September   Sept   | Suite, Apt.                           | #, etc.  |                                       | Suite, Apt. #, etc.            |                |                   | •        | 01202004   | Chg-NP      |          | CR    | 2E037  | (10/03     | )                 |             |
| Country   Zip   Country   S. Certificate of Status Desired   S8.75 Actionoral Fee Required   | City & Stat                           | е  |                                       | City & State                   |                |                   |          |  |             |          |       |        | <b>→</b>   |                   |             |
| R. Name and Address of Current Registered Agent HOLDEN, FLORENCE C  #### Agents Agent HOLDEN, FLORENCE C  #### Agents ##### Agents #### Agents ##### Agents ##### Agents ##### Agents ##### Agents ##### Agents ####################################   | Zip                                   |  | Country                               | Zip Country                    |                |                   |          | 5. Certificate of Status Desired \$8.75 Additional |             |          |       |        |            |                   |             |
| ### HOLDEN, FLORENCE C ### POrt Richey, FL 34653  8. The above named entily submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, I am familiar with, and accept the obligations of galaxies, agent.  ### SIGNATURE    FL   Zip Code   |                                       | 6. Name  | and Address of Current F              | Registered Agent               | gistered Agent |                   |          |  |             |          |       |        |            |                   |             |
| **************************************   |                                       |  |                                       |                                |                |                   |          |  |             |          |       |        |            |                   |             |
| New Port Richey, FL 34653  City  City  FL Zip Code  The above named entity submits statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the dollgations of pegistered agent.  SIGNATURE  Signature, Yoped or private name of registered septert.  Signature.  Signatu   | X252X80                               | PER REV NUM  | х <b>яхом</b> х 7256 С                | arlton Arms                    | Dr.            | Street Add        | ress (f  | P.O. Box Numbe                                     | r is Not Ac | ceptable | e)    |        |            |                   |             |
| 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  | XXXXXXX                               | : <b>?!</b>  | rt Dichov P                           | т                              |                |                   |          |  |             |          |       |        |            |                   |             |
| THE PACE AND DIRECTORS   Delete   THE NAME   Delete   THE NAME   DELECTOR   Delete   THE NAME   DELECTOR   Delete   THE NAME   DELETE   DE   |                                       |  |                                       | ic Richey, r                   |                | City              |          |  |             |          |       | FL     | Zip C      | ode               |             |
| SIGNATURE    Signatures. Symbol or privated narme of registered agent and the 1 apphabatie.   OKOTE Registered Agent argumature required when remaining   DATE   |                                       | 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept |                                       |                                |                |                   |          |  |             |          |       |        |            |                   |             |
| Filing Fee is \$61.25  Due by May 1, 2004  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE  MME  SIRET AUDRESS  GITY-ST-2P  HOLDEN, FLORENCE C  SIRET AUDRESS  GITY-ST-2P  TO Belete  TITLE  MME  SIRET AUDRESS  GITY-ST-2P  HOLDEN, FLORENCE C  SIRET AUBRESS  GITY-ST-2P  TITLE  MME  SIRET AUDRESS  GITY-ST-2P  HOLDEN, FLORENCE C  SIRET AUBRESS  GITY-ST-2P  TITLE  MME  GITY-ST-2P  HOLDEN, FLORENCE C  SIRET AUDRESS  GITY-ST-2P  TITLE  MME  GITY-ST-2P  TO Belete  TITLE  MME  GITY-ST-2P  HOLDEN, FLORENCE C  SIRET AUDRESS  GITY-ST-2P  TITLE  MME  GITY-ST-2P  TO Delete  TITLE  MME  GITY-ST-2P  TO DELEL, DONALD  DELEL, DONALD  DELEL, DONALD  DELEL, DONALD  SIRET AUDRESS  GITY-ST-2P  TO Delete  TITLE  MME  GITY-ST-2P  TO DELEL, DONALD  DELEL, DONALD  DELEL, DONALD  SIRET AUBRESS  GITY-ST-2P  TO Delete  TITLE  MME  GITY-ST-2P  TO DELEL, DONALD  GITY-ST-2P  TO DELEL, DONALD  DELEL, DONALD  SIRET AUBRESS  GITY-ST-2P  NEW PORT RICHEY, FL 34653  GITY-ST-2P  TO Delete  TITLE  MME  SIRET AUDRESS  GITY-ST-2P  NEW PORT RICHEY, FL 34655  TITLE  MME  SIRET AUDRESS  GITY-ST-2P  TARPON SPRINGS, FL 34689  TO Delete  TITLE  MME  SIRET AUDRESS  GITY-ST-2P  TO Delete  TITLE  MME  SIRET AUDRESS  GITY-ST-2P  TO Delete  TITLE  D  GRAF, HENRY  1809 RIVEREDGE DRIVE  TARPON SPRINGS, FL 34689  Delete  TITLE  MME  SIRET AUDRESS  GITY-ST-2P  TO Delete  TITLE  MME  SIRET AUDRESS  GITY-ST-2P  TO Delete  TITLE  D  GRAF, HENRY  1809 RIVEREDGE DRIVE  TO Delete  TO Delete  TITLE  MME  SIRET AUDRESS  GITY-ST-2P  TO Delete  TO Delete  TITLE  D  GRAF, HENRY  1809 RIVEREDGE DRIVE  TO Delete  TO Delete  TO Delete  TO Delete  TO Delete  TO DELET, DORESS  GITY-ST-2P  TO Delete  TO Delete  TO DELET, DORESS  GITY-ST-2P  TO DELET,   | inc obligat                           |  | 1                                     | 7/200                          |                |                   |          |  |             |          | _     |        |            |                   |             |
| Filling Fee is \$61.25 Due by May 1, 2004  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TILE DAGE, RAYMOND E STRET ADDRESS OTIV-ST-2P HOLIDAY, FL. 34690  TILE SIRET ADDRESS MARE HOLIDAY, FL. 34690  TILE MAKE JENKINS, DORIS STRET ADDRESS OTIV-ST-2P HOLIDSON, FL. 34667  TILE MAKE BAYONET POINT, FL. 34667  TILE D DEIGLE, DONALD BAYONET POINT, FL. 34653  TILE D GRAF, HENRY HOP SPRINGS, FL. 34689  TILE D WAKE STRET ADDRESS OTIV-ST-2P TARPON SPRINGS, FL. 34689  TILE D WAKE STRET ADDRESS OTIV-ST-2P TARPON SPRINGS, FL. 34689  TILE D WAKE STRET ADDRESS OTIV-ST-2P TARPON SPRINGS, FL. 34689  TILE D WAKE STRET ADDRESS OTIV-ST-2P TARPON SPRINGS, FL. 34689  TILE WAKE STRET ADDRESS OTIV-ST-2P TARPON SPRINGS, FL. 34689  TILE WAKE STRET ADDRESS OTIV-ST-2P TILE D WAKE STRET ADDRESS OTIV-ST-2P TARPON SPRINGS, FL. 34689  TILE WAKE STRET ADDRESS OTIV-ST-2P TARPON SPRINGS, FL. 34689  TILE WAKE STRET ADDRESS OTIV-ST-2P TARPON SPRINGS, FL. 34689  TILE WAKE STRET ADDRESS OTIV-ST-2P TARPON SPRINGS, FL. 34689  TILE WAKE STRET ADDRESS OTIV-ST-2P TARPON SPRINGS, FL. 34689  TILE WAKE STRET ADDRESS OTIV-ST-2P TARPON SPRINGS, FL. 34689  TILE WAKE STRET ADDRESS OTIV-ST-2P TARPON SPRINGS, FL. 34689  TILE WAKE STRET ADDRESS OTIV-ST-2P TARPON SPRINGS, FL. 34689  TILE WAKE STRET ADDRESS OTIV-ST-2P TARPON SPRINGS, FL. 34689  TILE WAKE STRET ADDRESS OTIV-ST-2P TARPON SPRINGS, FL. 34689  TILE WAKE STRET ADDRESS OTIV-ST-2P TARPON SPRINGS, FL. 34689  TILE WAKE STRET ADDRESS OTIV-ST-2P TARPON SPRINGS STRET ADDRESS OTIV-ST-2P TARPON SP  | SIGNATURE .                           | 1  | oresce C                              | 00 alden                       |                |                   |          |  |             |          |       |        | 0          | 4_                |             |
| Trust Fund Contribution. Acided to Fees   Florida Department of State    10. OFFICERS AND DIRECTORS   11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10    TITLE   DAGE, RAYMOND E   STREET ADDRESS   STREET A   |                                       | Signature, typed   | or printed name of registered agent a | nd title if applicable. (NO1E: | ; Hegistered A | Agent signature r | required | when reinstating)                                  |             |          |       | ATE    |            |                   |             |
| TITLE   P   DAGE, RAYMOND E   Sp09 RIDDLE ROAD   STRET ADDRESS   Sp09 RIDDLE ROAD   HOLIDAY, FL 34689   TITLE   NAME   STRET ADDRESS   Sp09 RIDDLE ROAD   HOLIDAY, FL 34689   TITLE   NAME   STRET ADDRESS   S   |                                       |  |                                       |                                |                |                   | ]        |  | Đ           |          |       |        |            |                   | •           |
| DAGE, RAYMOND E SITRET ADDRESS CITY-ST-2P HOLIDAY, FL 34690 TITLE S SITRET ADDRESS CITY-ST-2P HOLDEN, FL 34667 TITLE T HOLDEN, FL 34667 TITLE T HOLDEN, FL 34667 TITLE HOLDEN, FL 34667 TITLE MAKE SIMET ADDRESS SITRET ADDRESS SITRET ADDRESS CITY-ST-2P TITLE D EUEL, DONALD STRET ADDRESS CITY-ST-2P TITLE D GRAF, HENRY 1809 RIVEREDGE DRIVE TARPON SPRINGS, FL 34689 TITLE MAKE SIRET ADDRESS CITY-ST-2P TITLE D GRAF, HENRY 1809 RIVEREDGE DRIVE TARPON SPRINGS, FL 34689 TITLE MAKE SIRET ADDRESS CITY-ST-2P TITLE MAKE SIRET ADDRESS CITY-ST-2   | 10.                                   |  | OFFICERS AND DIR                      |                                | 11.            |                   | P        | ADDITIONS/CHA                                      | NGES TO     | OFFICE   | RS AN | D DIRE | CTORS      | IN 10             |             |
| STREET ADDRESS CITY-ST-2P HOLIDAY, FL 34690  STREET ADDRESS CITY-ST-2P STREET ADDRESS CITY-ST-2P STREET ADDRESS CITY-ST-2P STREET ADDRESS CITY-ST-2P STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS CITY-ST-2P STREET ADDRESS STREET ADDR   | TITLE<br>NAME                         | l *  | YMOND E                               | ☐ Delete                       |                |                   |          |  |             |          |       | -      | _ Change   | e [               | Addition    |
| TITLE  JENKINS, DORIS  SHEET ADDRESS  CITY-ST-ZIP  HOLDEN, FLORENCE C  STREET ADDRESS  CITY-ST-ZIP  DEUEL, DONALD  STREET ADDRESS  CITY-ST-ZIP  DEUEL, DONALD  GRAF, HENRY  STREET ADDRESS  CITY-ST-ZIP  TITLE  D  GRAF, HENRY  STREET ADDRESS  CITY-ST-ZIP  TO Change  Addition  Addition  Addition  ADDRESS  CITY-ST-ZIP  Delete  TITLE  D  GRAF, HENRY  STREET ADDRESS  CITY-ST-ZIP  TO Change  Addition  ADDRESS  CITY-ST-ZIP  Delete  TITLE  D  GRAF, HENRY  STREET ADDRESS  CITY-ST-ZIP  TO Change  Addition  ADDRESS  CITY-ST-ZIP  Delete  TITLE  D  GRAF, HENRY  STREET ADDRESS  CITY-ST-ZIP  TO Change  Addition  ADDRESS  CITY-ST-ZIP  ADDRESS  CITY-ST-ZIP  ADDRESS  CITY-ST-ZIP  TO CHANGE  STREET ADDRESS  CITY-ST-ZIP  ADDRESS  CITY-ST-ZIP  ADDRESS  CITY-ST-ZIP  TO CHANGE  STREET ADDRESS  CITY-ST-ZIP  TO CHANGE   | STREET ADDRESS                        | 1  |                                       |                                |                | ADDRESS           |          |  |             |          |       |        |            |                   |             |
| STREET ADDRESS   SAURE   STREET ADDRESS   STREET ADDRESS   CITY-ST-ZIP   |                                       | -  | , FL 34690                            |                                |                | T-ZIP             |          |  |             |          |       |        |            |                   |             |
| STREET ADDRESS CITY-ST-ZP HUDSON, FL 34667  TITLE T HUDEN, FLORENCE C STREET ADDRESS CITY-ST-ZP BAYONET POINT, FL 34667  TITLE D DEUEL, DONALD STREET ADDRESS CITY-ST-ZP NEW PORT RICHEY, FL 34653  TITLE D GRAF, HENRY STREET ADDRESS CITY-ST-ZP TARPON SPRINGS, FL 34689  TO Delete  TITLE D MAME STREET ADDRESS CITY-ST-ZP NEW PORT RICHEY, FL 34653  TITLE D GRAF, HENRY STREET ADDRESS CITY-ST-ZP TARPON SPRINGS, FL 34689  TO Delete TITLE NAME STREET ADDRESS CITY-ST-ZP TO Delete TITLE TO D TO Change Addition TO Change Addition TO Change Addition TO Change Addition TO CHANGE   |                                       | 1 -  | DORIS                                 | ☐ Delete                       |                |                   |          |  |             |          |       |        | Chang      | e [               | Addition    |
| TITLE   T  | STREET ADORESS                        |  |                                       |                                |                |                   |          |  |             |          |       |        |            |                   |             |
| NAME STREET ADDRESS CITY-ST-ZIP BAYONET POINT, FL 34667  TITLE DEUEL, DONALD 6212 SAPPHIRE DRIVE CITY-ST-ZIP NEW PORT RICHEY, FL 34653  TITLE D GRAF, HENRY STREET ADDRESS CITY-ST-ZIP TARPON SPRINGS, FL 34689  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE D Change Addition TITLE NAME STREET ADDRESS CITY-ST-ZIP Addition NAME STREET ADDRESS CITY-ST-ZIP TITLE D Change Addition TITLE D Change Addition TITLE D Change Addition TITLE D Change Addition NAME STREET ADDRESS CITY-ST-ZIP NEW PORT RICHEY, FL 34655   |                                       |  | , FL 34667                            |                                |                | T-ZIP             |          |  |             |          |       |        | F78 -      |                   |             |
| CITY-ST-ZIP  BAYONET POINT, FL 34667  CITY-ST-ZIP  TITLE  D DEUEL, DONALD STREET ADDRESS CITY-ST-ZIP  NEW PORT RICHEY, FL 34653  TITLE  D STREET ADDRESS CITY-ST-ZIP  NAME STREET ADDRESS CITY-ST-ZIP  NAME STREET ADDRESS CITY-ST-ZIP  NAME STREET ADDRESS CITY-ST-ZIP TARPON SPRINGS, FL 34689  TITLE NAME STREET ADDRESS CITY-ST-ZIP  D Delete  TITLE NAME STREET ADDRESS CITY-ST-ZIP TO Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP TO DELETE TO   |                                       |  | FLORENCE C                            | L.J. Delete                    |                |                   |          |  |             |          |       | į.     | Mg Chang   | e L               | _] Addition |
| TITLE D DEUEL, DONALD  NAME STREET ADDRESS CITY-ST-ZIP  NEW PORT RICHEY, FL 34653  TITLE D D Change Addition  NAME FERGUSON, John  STREET ADDRESS CITY-ST-ZIP  NEW PORT RICHEY, FL 34653  TITLE D Change Addition  NAME STREET ADDRESS CITY-ST-ZIP  NAME STREET ADDRESS CITY-ST-ZIP  TARPON SPRINGS, FL 34689  TITLE D Change Addition  NAME Wallace, Barbara  STREET ADDRESS CITY-ST-ZIP  New Port Richey, FL 34652  TITLE D Change Addition  NAME Wallace, Barbara  4015 Glissade Drive  New Port Richey, FL 34652  TITLE  NAME STREET ADDRESS CITY-ST-ZIP  NAME STREET ADDRESS CITY-ST-ZIP  TO Delete  TITLE  O Delete  TITLE  O Change Addition  Addition  NAME  STREET ADDRESS CITY-ST-ZIP  TO Delete  TITLE  O Delete  TITLE  O D Change Addition  Addition  NAME  STREET ADDRESS CITY-ST-ZIP  TO Delete  TITLE  O Delete  TITL   |                                       |  |                                       |                                |                |                   |          |  |             |          |       |        |            |                   |             |
| NAME STREET ADDRESS CITY-ST-ZIP NEW PORT RICHEY, FL 34653  TITLE NAME STREET ADDRESS CITY-ST-ZIP NEW PORT RICHEY, FL 34653  TITLE STREET ADDRESS CITY-ST-ZIP NEW PORT RICHEY, FL 34655  TITLE NAME STREET ADDRESS CITY-ST-ZIP TARPON SPRINGS, FL 34689  TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP TO Delete TITLE TO Change Addition Addition NAME STREET ADDRESS CITY-ST-ZIP TO DELET ADDRESS TO DELET ADDRESS CITY-ST-ZIP TO DELET ADDRESS CITY-ST-ZIP TO DELET ADDRESS CITY-ST-ZIP TO DELET ADDRESS T   |                                       | <del> </del>   | POIN1, FL 34667                       | NI outs                        |                |                   | <u> </u> |  |             |          |       |        |            |                   | 7           |
| STREET ADDRESS CITY-ST-ZP NEW PORT RICHEY, FL 34653  TITLE D STREET ADDRESS CITY-ST-ZP NEW PORT RICHEY, FL 34655  TITLE D STREET ADDRESS CITY-ST-ZP NEW PORT RICHEY, FL 34655  TITLE D STREET ADDRESS CITY-ST-ZP NAME STREET ADDRESS CITY-ST-ZP TARPON SPRINGS, FL 34689  TITLE NAME STREET ADDRESS CITY-ST-ZP TO Delete TITLE NAME STREET ADDRESS CITY-ST-ZP TO Delete TITLE NAME STREET ADDRESS CITY-ST-ZP TO DELET TO   |                                       |  | ONALD                                 | Delete                         |                |                   | _        | auson,   | John        |          |       | ı      | cuangi     | נן פ              | Addition D  |
| TITLE D GRAF, HENRY STREET ADDRESS CITY-ST-ZIP TARPON SPRINGS, FL 34689  Delete TITLE Wallace, Barbara 4015 Glissade Drive New Port Richey, FL 34652  TITLE NAME STREET ADDRESS CITY-ST-ZIP TO Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TO Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP TO DELETE TO   | 1                                     |  |                                       |                                |                | ADDRESS 1         | 107      | 40 Cent  | tra1        | Par      | k A   | ve,    |            |                   |             |
| NAME STREET ADDRESS CITY-ST-ZIP TARPON SPRINGS, FL 34689  TITLE NAME NAME STREET ADDRESS CITY-ST-ZIP New Port Richey, FL 34652  TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  12. I hereby certify that the information supplied with this filing does not qualify for the semplion stated in Section 119.07(3)(i), Florida Statutes, I further certify that the information indicated on this report or supplier with the land accurate and that my signature shall have the same large effect as if made under not be the land accurate and that my signature shall have the same large effect as if made under not be the land accurate and that my signature shall have the same large effect as if made under not be the land accurate and that my signature shall have the same large effect as if made under not be the large and first as if made under not be the large and first as if made under not be the large and first as if made under not be the large and first as if made under not be the large and first as if made under not be the large and first as if made under not be the large and first as if made under not be the large and first as if made under not be the large and first as if made under not be the large and first as if made under not be the large and first as if made under not be the large and first as if made under not be the large and first as if made under not be the large and first as if made under not be the large and first as if made under not be the large and not be the large and th   |                                       |  | TRICHET, FL 34033                     | N Polete                       |                | - 1               |          | Port 1   | Riche       | У,       | F'L   |        |            | a 15              | Addition    |
| TARPON SPRINGS, FL 34689  CITY-ST-ZIP  TARPON SPRINGS, FL 34689  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TARPON SPRINGS, FL 34689  CITY-ST-ZIP  TO Delete  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  Tarpon SPRINGS, FL 34689  TITLE  TO Delete  TO Delete  TITLE  TO Delete  TITLE  TO Delete  TO Delete  TO Delete  TITLE  TO Delete  TO D   | NAME                                  | GRAF, HE   |                                       | ÇA Delete                      |                | i -               | _        | lace, H  | Barba       | ra       |       | '      | Criangi    | . 2               | Z Addition  |
| TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  12. 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 report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under not better the large of first as if made under not better the large of fi   |                                       |  |                                       |                                |                | ADDRESS Z         | 401      |  |             |          |       |        |            |                   |             |
| NAME STREET ADDRESS CITY-ST-ZIP  12. 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 report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under not be the large of first as if made under not   | TITLE                                 |  |                                       | ☐ Delete                       | -              |                   | NEW      | FOLC I   | riche       | <u>Y</u> | بل۲   |        |            | е Г               | Addition    |
| CITY-ST-ZIP  CITY-ST-ZIP  12. 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 report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under not be the same legal effect as   | NAME<br>CITIETT ADDRESS               |  |                                       |                                |                | 40000000          |          |  |             |          |       |        | _ 5        | _                 |             |
| IBCICATED ON THIS CONTROL OF SHOULD REPORT IS THE AND ACCURATE AND THE ENGRAPHICA OF THE CONTROL AND THE CONTR   |                                       |  |                                       |                                |                |                   |          |  |             |          |       |        |            |                   |             |
| of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Horida Statutes; and that my name appears in Block 10 or Block 11 if  | Indicated                             | director.  |                                       |                                |                |                   |          |  |             |          |       |        |            |                   |             |