2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Jul 31, 2006 8:00 am Secretary of State

Pinning Pace of Business Sile Applied For Sile Scenario Sile Applied For Sile A	DOCUMENT # 731961 1. Entity Name THE LAKE WALES BOARD OF REALTORS, INC.									07-11-2	2006 900	018 049	****6	1.25
Sulle, Apt. etc. Sulle, Apt. etc. Sulle, Apt. etc. Sulle, Apt. etc. City & State Special State Stat	318 N. SCENIC HWY STE 50 P.O. BOX 671, #1 LAKE WALES, FL 33853 US LAKE WALES, FL 3					#50 33853 US								
City & State Country S. Centificate of States Desired S. S. 75 Associate Rest Application 7. Name and Address of Current Registanted Agent 7. Name and Address of New Registanted Agent 7. Name and Address of New Registanted Agent RAHLER, NANCY D P.O. BOX R71 Street Address (F.O. Box Number is Not Accessable) Street Address (F.O. Box Number is N	<u> </u>) 184 111 1811	O LINDY KATAR HANNA ORIGI	A AIRT CHAILE BLAIT	E1811 81811 81 <u>8</u>	N BIONYOT AT	Ш
S9-1694 165 Not Applicated S9-1694 165 Not Applicated S9-1694 165 S9-175 Additional S9-175 A	Suite, Apt. #, etc.			Suite, Apt. #, etc.					07072006	Chg-NP	CR2	2E037 (4/0	6)	
8. Name and Address of Current Registants Apont 7. Name and Address of New Registants Apont KAHLER, NANCY D P.O. BOX 671 318 N. SCENIC HWY LAKE WALES, FL 33853 City FL Tio Code 8. The above named entity submits this statement for the purpose of changing its registanted office or registanted agent, or both, in the State of Florida. I am transfer with, and accept and obligations of registanted agent, or both, in the State of Florida. I am transfer with, and accept and obligations of registanted agent, or both, in the State of Florida. I am transfer with, and accept and obligations of registanted agent, or both, in the State of Florida. I am transfer with, and accept and obligations of registanted agent, or both, in the State of Florida. I am transfer with, and accept and obligations of registanted agent, or both, in the State of Florida. I am transfer with, and accept and obligations of registanted agent, or both, in the State of Florida. I am transfer with, and accept and obligations of registanted agent, or both, in the State of Florida. I am transfer with, and accept a state of Florida Department of State Filling Fee is \$81.25 Due by September 6, 2008 9. Election Campaign Filamong Trust Fund Contribution 3.5.00 May De Added to Fees Florida Department of State F	City & State			City & State										
Name	Zip		Country	Zip	. 1	Cou	ntry		5. Certificate	of Status Desired	d 🛚			ıl
Steel Address (P.O. Box Number is Not Acceptable)		6. Name	and Address of Curren	nt Registered A	gent				7. Name and	Address of Nev	w Registere	d Agent		
SIGNATURE Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable)	KAHLER. I	NANCY D	H.				Name							
EARE WALES, FL 33853 City FL Zip Code 8. The above named entry submist 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 Filling Foe is \$61.25 Due by September 6, 2006 9. Election Campaign Financing Trust Fund Contribution 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 INE MAKE STREET ADDRESS 27 FEEL ADDRESS 2	P.O. BOX	671						Street Address (P.O. Box Number is Not Acceptable)						
The above named entity submiss 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 registered agent. SIGNATURE Symmetrized by precisions of 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 registered agent. SIGNATURE Filling Foe is \$61.25 Due by September 6, 2008 9. Election Campaign Financing Trust Fund Contribution. \$5,00 May Be Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 ITIEL KAHLER, NANCY 318 N. SCENIC HWY \$50 CITY-51-2P ITIEL DATE Change Added to Fees Florida Department of State For STEE ADORS STORE AGORS CITY-51-2P ITIEL DATE Change Added to Fees Florida Department of State Flor														
Filing Fee is \$61.25 Due by September 6, 2008 10.							City				F	L Zip (Code	
Filling Foe is \$61.25 Due by 3-sprtember 6, 2008 P. Election Campaign Financing \$5.00 May Be Added to Fees Make check payable to Florida Department of State	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 the obligations of registered agent.													
Filling Foe is \$61.25 Due by 3-sprtember 6, 2008 P. Election Campaign Financing \$5.00 May Be Added to Fees Make check payable to Florida Department of State	_													
Trust Fund Contribution. Accret to Fees Florida Department of State 10.												_		
Trust Fund Contribution. Accret to Fees Florida Department of State 10.	Filling Face is \$64.25 9. Flection Campaign Financing										Make che	eck naveh	le to	
TITLE NAME NAME NAME STREET ADDRESS CITY-S1-2P LAKE WALES, FL 33853 TITLE NAME STREET ADDRESS CITY-S1-2P LAKE WALES, FL 33853 TITLE D NAME STREET ADDRESS CITY-S1-2P LAKE WALES, FL 33853 TITLE D NAME STREET ADDRESS CITY-S1-2P LAKE WALES, FL 33853 TITLE D CITY-S1-2P LAKE WALES, FL 33853 TITLE D CITY-S1-2P LAKE WALES, FL 33853 TITLE D CITY-S1-2P CITY-S1-2P LAKE WALES, FL 33853 TITLE D CITY-S1-2P CITY	D			l l				_ '	TO VERY COLOR					
NAME STREET ADDRESS 318 N. SCENIC HVY #50 LAKE WALES, FL 33853 CITY-51-2P LAKE WALES, FL 33853 CITY-51-2P NAME STREET ADDRESS 12 FIRST ST. SOUTH LAKE WALES, FL 33853 CITY-51-2P NAME GRAVEL, JOHN GRAVEL, JOHN STREET ADDRESS 318 N. SCENIC HVY GRAVEL, JOHN STREET ADDRESS 318 N. SCENIC HVY CITY-51-2P NAME GRAVEL, JOHN STREET ADDRESS 10P STREET ADDRES		ne by set	tember 6, 2006	1	Frust Fund C	ontributi	on. L	. د	Added to Fees	F	lorida Dep	anment o	f State	
STREET ADDRESS CITY-ST-ZP LAKE WALLES, FL 33853 ITILE D MCLEAN, DAVID STREET ADDRESS CITY-ST-ZP LAKE WALLES, FL 33853 ITILE D MALE STREET ADDRESS CITY-ST-ZP LAKE WALLES, FL 33853 ITILE D MALE STREET ADDRESS CITY-ST-ZP LAKE WALLES, FL 33853 ITILE P MALE GRAVEL, JOHN GRAVEL, JOHN STREET ADDRESS CITY-ST-ZP LAKE WALLES, FL 33853 ITILE P MALE GRAVEL, JOHN STREET ADDRESS CITY-ST-ZP LAKE WALLES, FL 33853 ITILE P MALE STREET ADDRESS CITY-ST-ZP LAKE WALLES, FL 33853 ITILE P MALE STREET ADDRESS CITY-ST-ZP LAKE WALLES, FL 33853 CITY-ST-ZP ITILE MALE STREET ADDRESS CITY-ST-ZP CITY-ST-ZP THILE MALE STREET ADDRESS CITY-ST-ZP CITY-ST	<u> </u>	ue by set		DIRECTORS	FIRST FUNG C		on. L				•			
CITY-ST-ZIP LAKE WALES, FL 33853 CITY-ST-ZIP ITILE MACLEAN, DAVID STREET ADDRESS CITY-ST-ZIP LAKE WALES, FL 33853 TITLE MALER, JAMES F STREET ADDRESS CITY-ST-ZIP LAKE WALES, FL 33853 TITLE MALER, JAMES F STREET ADDRESS CITY-ST-ZIP LAKE WALES, FL 33853 TITLE P GRAVEL, JOHN STREET ADDRESS CITY-ST-ZIP LAKE WALES, FL 33853 TITLE P GRAVEL, JOHN STREET ADDRESS CITY-ST-ZIP LAKE WALES, FL 33853 TITLE P GRAVEL, JOHN STREET ADDRESS CITY-ST-ZIP LAKE WALES, FL 33853 CITY-ST-ZIP TITLE VP Delete TITLE WALES TITLE WALES TITLE WALES TITLE TITLE WALES TITLE WALES TITLE WALES TITLE TITLE WALES TITLE TITLE WALE TITLE THE WALE TITLE THE THE WALE TITLE THE THE THE THE THE THE THE	10.	Т	OFFICERS AND I	DIRECTORS	 	11.		A	ODITIONS/CH	ANGES TO OFFI	•	DIRECTOR	S IN 10	Add tion
MANE MCLEAN, DAVID STRET ADDRESS 12 FIRST ST. SOUTH STRET ADDRESS CITY-ST-ZP CARE WALES, FL 33853 CITY-ST-ZP COANGE \Q Addition Addition Change \Q Addition Change \Q Addition Addition Change \Q Addition Addition ADDITION CHANGE \Q ADDITION	10. TITLE NAME	T KAHLER,	OFFICERS AND I	DIRECTORS	 	11. TITLE		A	ODITIONS/CH	ANGES TO OFFI	•	DIRECTOR	S IN 10	Addition
STREET ADDRESS CITY-ST-JP LAKE WALES, FL 33853 TITLE D MANE STREET ADDRESS CITY-ST-JP LAKE WALES, FL 33853 FITLE P GRAVEL, JOHN SIRET ADDRESS CITY-ST-JP LAKE WALES, FL 33853 FITLE P GRAVEL, JOHN SIRET ADDRESS CITY-ST-JP LAKE WALES, FL 33853 FITLE P GRAVEL, JOHN SIRET ADDRESS CITY-ST-JP LAKE WALES, FL 33853 FITLE P GRAVEL, JOHN SIRET ADDRESS CITY-ST-JP LAKE WALES, FL 33853 CITY-ST-JP LAKE WALES, FL 33853 CITY-ST-JP TITLE WESTLY WISE, JAMES STREET ADDRESS CITY-ST-JP FROSTPROOF, FL 33843 CITY-ST-JP TITLE MANE STREET ADDRESS CITY-ST-JP LAKE WALES, FL 33853 CITY-ST-JP STREET ADDRESS STREET ADDRESS STREET ADDRESS CITY-ST-JP STREET	10. TITLE NAME STREET ADDRESS	T KAHLER, 318 N. SC	OFFICERS AND I	DIRECTORS	 	11. TITLE NAME STREE	ET ADDRESS	A	ODITIONS/CH	ANGES TO OFFI	•	DIRECTOR	S IN 10	Addition
CITY-ST-ZIP LAKE WALES, FL 33853 CITY-ST-ZIP MAKE KAHLER, JAMES F KAHLER, JAMES F SIREIT ADDRESS 318 N. SCENIC HVY CITY-ST-ZIP Change Addition ANAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZI	10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	T KAHLER, 318 N. SC LAKE WA	OFFICERS AND I NANCY CENIC HWY #50 NLES, FL 33853	DIRECTORS	☐ Detate	11. TITLE NAME STREE CITY-	ET ADDRESS S1-ZIP	A	ODITIONS/CH	ANGES TO OFFI	•	DIRECTOR.	S IN 10	
TITLE D KAHLER, JAMES F SIRET ADDRESS 318 N. SCENIC HWY CIV-S1-ZP LAKE WALES, FL 33853 ITTLE P Delete TITLE PART - PRES, FL 33853 ITTLE P Delete TITLE PART - PRES, GLIV-S1-ZP LAKE WALES, FL 33853 ITTLE P Delete TITLE PART - PRES, GLIV-S1-ZP LAKE WALES, FL 33853 ITTLE VP Delete TITLE PART - PRES, GLIV-S1-ZP LAKE WALES, FL 33853 ITTLE VP Delete TITLE PREST DORESS CITY-S1-ZP LAKE WALES, FL 33853 ITTLE VP Delete TITLE PREST DORESS CITY-S1-ZP TREST ADDRESS STREET ADDRESS CITY-S1-ZP TREST ADDRESS CITY-S1-ZP TREST DORESS CITY-S1-ZP TREST ADDRESS CITY-S1-ZP TREST ADD	10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	T KAHLER, 318 N. SC LAKE WA D MCLEAN	NANCY CENIC HWY #50 ALES, FL 33853 DAVID	DIRECTORS	☐ Detate	11. TITLE NAME STREE CITY- TITLE NAME	ET ADORESS S1-ZIP	A	ODITIONS/CH	ANGES TO OFFI	•	DIRECTOR.	S IN 10	
STREET ADDRESS OTY-ST-ZPP LAKE WALES, FL 33853 ITTLE PART	10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	T KAHLER, 318 N. SC LAKE WA D MCLEAN, 12 FIRST	OFFICERS AND I	DIRECTORS	☐ Detate	11. TITLE NAME STREE CITY- TITLE NAME STREE	ET ADDRESS S1-ZIP	A	ODITIONS/CH	ANGES TO OFFI	•	DIRECTOR.	S IN 10	
CITY-SI-ZIP LAKE WALES, FL 33853 12. I hereby certify that the information supplied with this filting does not qualify for the exemptions contained in Chapter 119, Florida Statutes, 1 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 oath; that I am an officer or director of the propersion or the receiver or trustee empowered to execute this report as required by Chapter 6117, Florida Statutes, and that my name appears in Block 11 of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 6117, Florida Statutes, and that my name appears in Block 11 of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 6117, Florida Statutes, and that my name appears in Block 11 of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 6117, Florida Statutes, and that my name appears in Block 11 of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 6117, Florida Statutes, and that my name appears in Block 11 of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 6117, Florida Statutes, and that my name appears in Block 11 of the corporation of the receiver or trustee empowered to execute the same legal effect	TO. VITLE NAME STREET ADDRESS CITY-ST-ZIP VITLE NAME STREET ADDRESS CITY-ST-ZIP	T KAHLER, 318 N. SC LAKE WA D MCLEAN 12 FIRST LAKE WA	OFFICERS AND I	DIRECTORS	☐ Deficite ☐ Deficite	11. TITLE NAME STREI CITY- TITLE NAME STREI CITY-	ET ADDRESS S1-ZIP	The	Pres,	ANGES TO OFFI	CERS AND	DIRECTOR Chan	S IN 10	Addition
ITILE P Change Addition Change Chang	10. ITILE NAME STREET ADDRESS CITY-ST-ZIP ITILE NAME STREET ADDRESS CITY-ST-ZIP ITILE KAME	T KAHLER, 318 N. SC LAKE WA D MCLEAN 12 FIRST LAKE WA D KAHLER,	OFFICERS AND I	DIRECTORS	☐ Deficite ☐ Deficite	11. TITLE NAME STREI CITY- TITLE NAME CITY- TITLE NAME NAME NAME	ET ADDRESS ST-ZIP	v-	Pres.	ANGES TO OFFI	CERS AND	DIRECTOR Chan	S IN 10	Addition
STREET ADDRESS CITY-ST-ZP LAKE WALES, FL 33853 CITY-ST-ZP TITLE WESTLY WISE, JAMES STREET ADDRESS CITY-ST-ZP TITLE WESTLY WISE, JAMES STREET ADDRESS TOP, ST-ZP TITLE WESTLY WISE, JAMES STREET ADDRESS CITY-ST-ZP TITLE WAME STREET ADDRESS CITY-ST-ZP TITLE WAME STREET ADDRESS CITY-ST-ZP TITLE WALE STREET ADDRESS CITY-ST-ZP TITLE TITLE TITLE TITLE TITLE TO-MANE STREET ADDRESS TITLE TITLE TO-MANE STREET ADDRESS TITLE TO	10. ITILE NAME STREET ADDRESS CITY-ST-JIP ITILE NAME STREET ADDRESS CITY-ST-JIP TITLE NAME STREET ADDRESS STREET ADDRESS	T KAHLER, 318 N. SC LAKE WA D MCLEAN 12 FIRST LAKE WA D KAHLER, 318 N. SC	OFFICERS AND I	DIRECTORS	☐ Deficite ☐ Deficite	11. TITLE NAME STREI CITY- TITLE NAME CITY- TITLE NAME STREI STREI STREI	ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	v-	Pres.	ANGES TO OFFI	UNOR	DIRECTOR. Chan	\$ IN 10 \$\$	Addition
CITY-ST-ZP LAKE WALES, FL 33853 CITY-ST-ZP TITLE WESTLY WISE, JAMES STREET ADDRESS CITY-ST-ZP TITLE WESTLY WISE, JAMES STREET ADDRESS CITY-ST-ZP TITLE MAME STREET ADDRESS CITY-ST-ZP TITLE MAME STREET ADDRESS CITY-ST-ZP TITLE MAME STREET ADDRESS CITY-ST-ZP Change Addition AME STREET ADDRESS CITY-ST-ZP LAKE WALES FL 33853 12. I hereby certify that the information supplied with this filting does not qualify for the exemptions contained in Chapter 119, 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 oath; that I am an officer or director of the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 11 of Blo	10. ITILE NAME STREET ADDRESS CITY-ST-ZIP ITILE NAME STREET ADDRESS CITY-ST-ZIP ITILE NAME STREET ADDRESS CITY-ST-ZIP	T KAHLER. 318 N. SC LAKE WA D MCLEAN 12 FIRST LAKE WA D KAHLER. 318 N. SC LAKE WA	OFFICERS AND I	DIRECTORS	Detete Detete	11. TITLE NAME STREI CITY- TITLE NAME STREI CITY- TITLE NAME STREI CITY-	ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	v-	Pres.	CON	UNOR	DIRECTOR Chan	SIN 10 9: []/ 9: []/	Addition Addition
TITLE VP Delete	10. ITTLE NAME STREET ADDRESS CITY-ST-ZIP ITTLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP ITTLE	T KAHLER, 318 N. SC LAKE WA D MCLEAN 12 FIRST LAKE WA D KAHLER, 318 N. SC LAKE WA	NANCY CENIC HWY #50 NLES, FL 33853 DAVID ST. SOUTH NLES, FL 33853 JAMES F CENIC HWY NLES, FL 33853	DIRECTORS	Detete Detete	THE NAME STREET COTY-	ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	v-	Pres.	CON	UNOR	DIRECTOR Chan	SIN 10 9: []/ 9: []/	Addition Addition
ITILE Delete TITLE PAM ESTES Change Addition	10. ITTLE NAME STREET ADDRESS CITY-ST-ZIP ITTLE NAME STREET ADDRESS CITY-ST-ZIP ITTLE NAME STREET ADDRESS CITY-ST-ZIP ITTLE NAME STREET ADDRESS STREET ADDRESS	T KAHLER. 318 N. SC LAKE WA D MCLEAN 12 FIRST LAKE WA D KAHLER. 318 N. SC LAKE WA P GRAVEL. 343 CENT	NANCY CENIC HWY #50 ALES, FL 33853 DAVID ST. SOUTH ALES, FL 33853 JAMES F CENIC HWY ALES, FL 33853 JAMES F CENIC HWY ALES, FL 33853	DIRECTORS	Detete Detete	11. TITLE NAME STREI CITY- TITLE NAME STREI CITY- TITLE NAME STREI CITY- TITLE NAME STREI STREI STREI STREI STREI STREI STREI	ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	v-	Pres.	CON	UNOR	DIRECTOR Chan	SIN 10 9: []/ 9: []/	Addition Addition
ITILE Delete TITLE PAM ESTES Change Addition	10. ITTLE NAME STREET ADDRESS CITY-ST-ZIP	T KAHLER. 318 N. SC LAKE WA D MCLEAN 12 FIRST LAKE WA D KAHLER. 318 N. SC LAKE WA P GRAVEL. 343 CENT LAKE WA	NANCY CENIC HWY #50 ALES, FL 33853 DAVID ST. SOUTH ALES, FL 33853 JAMES F CENIC HWY ALES, FL 33853 JAMES F CENIC HWY ALES, FL 33853	DIRECTORS	Detete Detete Oelete	11. TITLE NAME STREI CITY- TITLE STREI CITY- TITLE NAME STREI CITY- TITLE NAME STREI CITY- TITLE NAME CITY-	ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	V- light	Pres,	STUA STUA STUA ALES	UNOR	Chan	S IN 10 or	Addition Addition
ITILE Delete TITLE PAM ESTES Change Addition	10. ITILE NAME STREET ADDRESS CITY-ST-ZIP ITILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP ITILE STREET ADDRESS CITY-ST-ZIP TITLE	T KAHLER, 318 N. SC LAKE WA D MCLEAN, 12 FIRST LAKE WA D KAHLER, 318 N. SC LAKE WA P GRAVEL, 343 CENT LAKE WA	NANCY CENIC HWY #50 NLES, FL 33853 DAVID ST. SOUTH NLES, FL 33853 JAMES F CENIC HWY NLES, FL 33853 JOHN TRAL AVE WEST NLES, FL 33853	DIRECTORS	Detete Detete Oelete	† 1. TITLE NAME STREIF CITY- TITLE	ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	V- light	Pres,	STUA STUA STUA ALES	UNOR	Chan	S IN 10 or	Addition Addition
indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as it 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. Roirds Statutes; and that my name appears in Block 10 or Block 11 of Block 11 o	10. ITITE NAME STREET ADDRESS CITY-ST-ZIP ITITE NAME	T KAHLER, 318 N. SC LAKE WA D MCLEAN 12 FIRST LAKE WA D KAHLER, 318 N. SC LAKE WA P GRAVEL, 343 CENT LAKE WA VP WESTLY	NANCY CENIC HWY #50 NLES, FL 33853 DAVID ST. SOUTH NLES, FL 33853 JAMES F CENIC HWY NLES, FL 33853 JOHN TRAL AVE WEST NLES, FL 33853 WISE, JAMES	DIRECTORS	Detete Detete Oelete	11. TITLE NAME STREI CITY- TITLE NAME STREI CITY- TITLE NAME STREI CITY- TITLE CITY- TITLE NAME STREI CITY- TITLE NAME STREI CITY-	ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	V- light	Pres,	STUA STUA STUA ALES	UNOR	Chan	S IN 10 or	Addition Addition
indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as it 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. Roirds Statutes; and that my name appears in Block 10 or Block 11 of Block 11 o	10. ITITE NAME STREET ADDRESS CITY-ST-ZIP ITITE NAME STREET ADDRESS CITY-ST-ZIP TITITE NAME STREET ADDRESS	T KAHLER, 318 N. SC LAKE WA D MCLEAN, 12 FIRST LAKE WA D KAHLER, 318 N. SC LAKE WA P GRAVEL, 343 CENT LAKE WA VP WESTLY 109 N. SC	DAVID ST. SOUTH ALES, FL. 33853 JAMES F CENIC HWY ALES, FL. 33853 JAMES F CENIC HWY ALES, FL. 33853 JOHN TRAL AVE WEST ALES, FL. 33853 WISE, JAMES CENIC HWY	DIRECTORS	Detete Detete Oelete	11. TITLE NAME STREI CITY- TITLE NAME STREI	ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	V- light	Pres, ctor obert 247 E.	CON STUA WALES	UNO R	Chan	S IN 10 90	Addition Addition Addition
indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as it 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, Roirda Statuteis; and that my name appears in Block 10 or Block 11 of Block 11	10. ITITE NAME STREET ADDRESS CITY-ST-ZIP ITITE NAME STREET ADDRESS CITY-ST-ZIP TITLE	T KAHLER, 318 N. SC LAKE WA D MCLEAN, 12 FIRST LAKE WA D KAHLER, 318 N. SC LAKE WA P GRAVEL, 343 CENT LAKE WA VP WESTLY 109 N. SC	DAVID ST. SOUTH ALES, FL. 33853 JAMES F CENIC HWY ALES, FL. 33853 JAMES F CENIC HWY ALES, FL. 33853 JOHN TRAL AVE WEST ALES, FL. 33853 WISE, JAMES CENIC HWY	DIRECTORS	Detete Detete Detete	TILE THE THE THE THE THE THE THE T	ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	V- light	Pres, ctor obert 247 E.	CON STUA WALES	UNO R	Chan	S IN 10 90	Addition Addition Addition
indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as it 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, Roirda Statuteis; and that my name appears in Block 10 or Block 11 of Block 11	10. ITTLE NAME STREET ADDRESS CITY-ST-ZIP ITTLE NAME STREET ADDRESS CITY-ST-ZIP ITTLE NAME STREET ADDRESS CITY-ST-ZIP ITTLE STREET ADDRESS CITY-ST-ZIP ITTLE NAME	T KAHLER, 318 N. SC LAKE WA D MCLEAN, 12 FIRST LAKE WA D KAHLER, 318 N. SC LAKE WA P GRAVEL, 343 CENT LAKE WA VP WESTLY 109 N. SC	DAVID ST. SOUTH ALES, FL. 33853 JAMES F CENIC HWY ALES, FL. 33853 JAMES F CENIC HWY ALES, FL. 33853 JOHN TRAL AVE WEST ALES, FL. 33853 WISE, JAMES CENIC HWY	DIRECTORS	Detete Detete Detete	TILE NAME STREI CITY- TITLE NAME NAME NAME NAME NAME NAME NAME NAM	ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	V- light	Pres, ctor obert 247 E.	CON STUA WALES	UNO R	Chan	S IN 10 90	Addition Addition Addition
2/2/1/ 3/2/1/1/2	10. ITTLE NAME STREET ADDRESS CITY-ST-ZIP ITTLE NAME STREET ADDRESS	T KAHLER, 318 N. SC LAKE WA D MCLEAN, 12 FIRST LAKE WA D KAHLER, 318 N. SC LAKE WA P GRAVEL, 343 CENT LAKE WA VP WESTLY 109 N. SC	DAVID ST. SOUTH ALES, FL. 33853 JAMES F CENIC HWY ALES, FL. 33853 JAMES F CENIC HWY ALES, FL. 33853 JOHN TRAL AVE WEST ALES, FL. 33853 WISE, JAMES CENIC HWY	DIRECTORS	Detete Detete Detete	THE STREET COLY-	ET ADDRESS ST-ZIP	V- light	Pres, ctor obert 247 E.	CON STUA WALES	UNO R	Chan	S IN 10 90	Addition Addition Addition