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2. Principal Place of Business   2a. Melling Address   2b PO Box 149425   59-1879987   Solt Application   1751 Crace Hopper Avenue   2e PO Box 149425   59-1879987   Solt Application   2e PO Box 149425   So	STE 2006 ORLANDO F			ORLAN							За.		-
175  Crace Hopper Avenue   28 PO Box 149425   S9-1879987   Not Applicable   Sulte, Apt. 4, etc.   22   Bull Iding 2006   27   Sulte, Apt. 4, etc.   5. Certificate of Status Desired   28 R.75 Additional Fee Required   29 Bull Iding 2006   27   State   28 Or Lando, FL   5. Certificate of Status Desired   28 R.75 Additional Fee Required   5. Certificate of Status Desired   28 R.75 Additional Fee Required   28 Or Lando, FL   5. Certificate of Status Desired   28 R.75 Additional Fee Required   29 Require	2. Principal F	lace of Business		2a. Maili	ing Address		<u></u>	-	4. FEI Number				
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9, Name and Address of Current Registered Agent  10, Name and Address of New Registered Agent  11, Name and Address of New Registered Agent  12, Street Address (P.O. Box Number is Not Acceptable)  13, 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 by the corporation's board of directors. Thereby accept the appointment as registered agent and this familiar with, and acceptable obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  TOSD  WERNER, THOMAS  STREET ADDRESS  601 E ROLLINS AVE  ORLANDO FL  UNITE B.D  CD  CD  CD  CD  CD  CD  CDL  CDL  CD	Zıp		,	Zip		Coi	•		8. This corpora	ation has liability fo		tax under s.	
BROCKMAN, CHRIS 2 S ORANGE AVE ORLANDO FL 32801  84 City FL 85 Zip Code  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 off 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 agent, and accept the appointment as registered agent. I am formation and the replacement of the chilgations of, Section 617.0503, Florida Statutes.  SIGNATURE  SIGNATURE  TILE  TOSD  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  TILE  TOSD  ORLANDO FL  11. TITLE  ORANGE  ORLANDO FL  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  ORANGE  ORLANDO FL  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  ORANGE  ORLANDO FL  14. City-S1-2P  ORLANDO FL  14. City-S1-2P  ORLANDO FL  14. City-S1-2P  ORLANDO FL  14. City-S1-2P  ORLANDO FL  17. CeD  ORLANDO FL  18. OCHUM, TOM  32 NAME  YOCHUM, TOM  32 NAME  YOCHUM, TOM  390 N ORANGE AVE STE 900  ORLANDO FL  TITLE  ORLANDO FL  ORLANDO FL	24 328					[30] ()	range	1					
SIGNATURE   Signature, typed or printed name of registered agent and this if applicable   (NOTE: Registered Agent agreature required when reinstating)   DATE		MAN LINKS									abiei		
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE TOSD	11. Pursuani	ANGE AVE DO FL 32801  to the provisions of pred agent, or both,	n the State of Florida	a. Such char	nge was authoriz	es, the ab	84 City	rocratio	n euhmite thie e	totament for the n	F	Changing its n	egistered office
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CITY-ST-ZIP  ORLANDO FL  DELETE  5.1 TITLE  STREET ADDRESS  CITY-ST-ZIP  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 inclosed 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 cath; that I am an officer or director of the corporation or ne receiver or trusted empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or block of it changed, or on a statishment with an address.	ORLANI  11. Pursuani or registr familiar v SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE B D NAME STREET ADDRESS CITY-ST-ZIP TITLE C D NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	TOSD WERNER, THE 601 E ROLLIN ORLANDO FL CED YOCHUJ 390 N ORANC ORLANDO FL CD SAMS, KIM 1375 BUENA LAKE BUENA PD HEAD, NAPOL 1751 GRACE	n the State of Florida  boligations of, Section  name of registered agent a  OFFICERS AND  DMAS  S AVE  SE AVE STE 1800  ALL, TOM  SE AVE STE 900  VISTA DR  VISTA FL 00  EAN B	a. Such char on 617.0503, and title if applicable DIRECTORS	nge was authoriz , Florida Statutes	DTE: Registere 3.  13. 1.11 1.21 1.33 1.4( 2.11 2.21 2.33 2.4 3.17 3.21 4.11 4.2 4.33 4.4( 5.11) 5.21 5.33	84 City  Ove-named co corporation's  ITILE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	D Bav 200 Orl	a, John S Orang ando, FI hum, Tom N Orang ando, FI (Chair, ockman, (Chair, ock	tatement for the peby accept the appropriate to the appropriate to the peby accept the appropriate to the peby accept the appropriate to the appro	DATE FICERS A	changing its ras registered  ND DIRECTO Change  Change  Change	egistered office agent. I am  ORS IN 12  Addition  Addition