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4. 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	FT. PIER I. Pursuant Ic or registerer familiar with GNATURE 2. IF ME REELADDRESS IY-ST-ZIP IF ME REELADDRESS IY-ST-ZIP IE IX-ST-ZIP IE IX-ST-ZIP IE IX-ST-ZIP IE IX-ST-ZIP IE IX-ST-ZIP IE IX-ST-ZIP IE IX-ST-ZIP IX-ST	CE FL 34982 a the provisions of Sections 617.05 ad agent, or both, in the State of Fl h, and accept the obligations of. Si Segurature, INFect or printed name of respective OFFICE RS / PD RIGDON, ANDREW C. 3204 SUNRISE BLVD. FT PIERCE FL 34982 VD MOODY, GEORGE 202 SOUTHERN AVE FT. PIERCE FL TD MOODY, GEORGE 202 SOUTHERN AVE FT. PIERCE FL TD MOODY, GEORGE 202 SOUTHERN AVE FORT PIERCE FL SD LESTER, SANDRA 579 TWYLITE TERRANCE	ection 61, 60, 03, 7GE(gent and litig tapplicable		5. DIE Reputer 11 12 13 14 21 22 23 24 31 32 33 41 42 43 44 51 52 53 54 61 62	83 84 City above -named cole corporation's f above -stress corporation's f <td>ET PIERCE rporation submits this stater board of directors. I hereby a ADD.TIONS/CH/ PD MOODY, GEOI 202 SOUTHER FT PIERCE, I VD SIEGEL, ARIS 1510 SW LEXI PORT ST LUC TD PETTEY, FRA 2155 HARDINC</td> <td>nent for the purp accept the appo NGES 10 OFFI RGE N AVE FL 3491 STIDE NGTON CIE, FL NK G ST</td> <td>pose of chan intment as re- DATE CFRS AND 50 50 50 50 50 50 50 50 50 50 50 50 50</td> <td>3 4 ging its re- egistered Change Change Change Change Change Change</td> <td>950 gistered offic agent. am FIS IN 12 Addition Addition Addition Addition</td>	ET PIERCE rporation submits this stater board of directors. I hereby a ADD.TIONS/CH/ PD MOODY, GEOI 202 SOUTHER FT PIERCE, I VD SIEGEL, ARIS 1510 SW LEXI PORT ST LUC TD PETTEY, FRA 2155 HARDINC	nent for the purp accept the appo NGES 10 OFFI RGE N AVE FL 3491 STIDE NGTON CIE, FL NK G ST	pose of chan intment as re- DATE CFRS AND 50 50 50 50 50 50 50 50 50 50 50 50 50	3 4 ging its re- egistered Change Change Change Change Change Change	950 gistered offic agent. am FIS IN 12 Addition Addition Addition Addition