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Country	Suite, Apt.		Suite, Apt. #, etc.	127 lerruce		Not Applicable \$8.75 Additional
20	City & Stat	.,	City & State			Fee Required
9. Name and Address of Current Registered Agent  9. Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent  10. Name and Add					Trust Fund Contribution	Added to Fees
STEWART, EDWIN P 4132 HENNARD DR TALLAHASSEE FL 32303  11. Pursuant to the provision of the provision of the pursuant to the pursuant t	24	25 Alachua	32653	30 Alachua	Florida Statutes	Yes No
## City Graine SUPILE    Pursuant to the provisions of Septions 647,0502 and 617 1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered pigent of point, in the State of Florida. Such change was authorized by the corporation is board of directors. I herothy accept the appointment as registered spent of provisions of Section 617, 6503, Florida Statutes.    FL   S5   Zip Code			rent Registered Agent	81 Name A		legistered Agent
TALLAHASSEE FI. 32303    A				82 Street Add	ress (P.O. Box Number is Not Accepta	ble)
11. Pursuant to the provisions of Septions 547 0502 and 617 1508. Florida Statutes, the above named corporations board of directors. I hereby accept the purpose of changing its registered agent, I am family with a supplied of significant of Section 617 0503. Florida Statutes agent. I am family with a supplied of significant of Section 617 0503. Florida Statutes  SIGNATURE    OFFICERS AND DIRECTORS   13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				ା । ୫୯୬		· · · · · · · · · · · · · · · · · · ·
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217-S1-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 indicated on this approach contains a property of supplemental contains a property	11. Pursuant office or ragent. I ar agent. I ar agent. I ar signature  12. Title name street address city-st-zip title name street address city-st-zip title name street address city-st-zip title street address city-st-zip title name street address city-st-zip title	Signature. typed of irrited name of registered of STEWART, EDWIN P. 4132 HENIARD DR. TALLAHASSEE FL PD DELAPARTE, AL 8613 S.W. 1ST AVE GAINESVILLE FL TD SCHUMAN, WERNER RT. 3. BOX 56 B HAWTHORNE FL 32640 SD STEWART, LUCILLE 4132 HENIARD DRIVE	AND DIRECTORS  DELETE  DELETE  DELETE  DELETE	as, the above-named corputative required by the corporation of the cor	poration submits this statement for the join's board of directors. I hereby acception to the properties of the propertie	Date  Change Addition  Change Addition  Change Addition  Change Addition
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further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if	11. Pursuant office or in agent. I ai agent. I ai agent. I ai agent. I ai signature	Signature. typed of irrited name of registered of STEWART, EDWIN P. 4132 HENIARD DR. TALLAHASSEE FL PD DELAPARTE, AL 8613 S.W. 1ST AVE GAINESVILLE FL TD SCHUMAN, WERNER RT. 3. BOX 56 B HAWTHORNE FL 32640 SD STEWART, LUCILLE 4132 HENIARD DRIVE	AND DIRECTORS  DELETE  DELETE  DELETE  DELETE	as, the above-named corputationized by the corporationida Statutes  E Registered Agent signature requirations  13.  1.1 Title 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 Title 2.2 NAME 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME	poration submits this statement for the join's board of directors. I hereby acception to the properties of the propertie	purpose of changing its registered of the appointment as registered of the appointment as registered.
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