<del> </del>	OR BEFORE 8/7/96: \$61.25 (IF DIS	BE DISSOLVE SOLVED, MINI				25.)		
CORF ANNU	NPROFIT PORATION AL REPORT			B. Mortham ary of State				
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	NTS WITHOUT PARTNERS ARK AREA CHAPTER NO		ACKSONVILL	.E-ORAN				
incipal Place		-	Address			I <b>USU</b> ARI <b>IAO IN 1</b> 11100 11110 HAUN	IOIDE OILI OFOIL OFOIL OILI	
P.O. BOX 7443 IACKSONVILLE	J E FL 32238-4443		BOX 7443 Sonville FL 3223	38-4443				
						3. Date Incorporated or Qualifie 05/14/1982		ast Report 6/1995
Principal Pla	ace of Business	28. Mai	iling Address			4. FEI Number 23-7279289		Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc. 27				5. Certificate of Status Desired		75 Additional Required
City & State	· · ·		& State			6. Election Campaign Financing Trust Fund Contribution		.00 May Be Ided to Fees
Zip	Country 25	21p		Country 30	y	8. This corporation has liability f Florida Statutes		
	9. Name and Address of Curre	ent Registered	d Agent	81	Name	10. Name and Address of New	Registered Agent	
SCOTT, BARBARA A 4621 COLONIAL AVE. JACKSONVILLE FL 32210			82	Street A	ddress (P.O. Box Number is Not Accept	able)		
			83					
					<b>↓</b>		TTT	
. Pursuant to	o the provisions of Sections 617.05	02 and 617.15	508, Florida Statu	84 tes, the above	·	orporation submits this statement for the	FL 85	Zip Code
	Signature, typed or printed name of registered a	gent and title il appl	cable (NC	tes, the above authorized by orida Statutes	e-named corports.	orporation submits this statement for the ration's board of directors. I hereby accor equired when reinstating)	purpose of changing pointment DATE	ng its registered as registered
GNATURE	Signature, hyped or printed name of registered a OFFICERS A PD		cable (NC	tes, the above authorized by orida Statutes	e-named corports.	equired when reinstating) ADDITIONS/CHANGES TO OF	PL purpose of changing the appointment DATE FICERS AND DIREC	ng its registered as registered
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