FILE NOW: FILING FEE IS \$61.25					•	FILED		
COF ANNU	DNPROFIT RPORATION JAL REPORT <b>1997</b>		Sandra E Secreta	RTMENT OF STATE . Mortham iy of State CORPORATIONS		Apr 10 1 Secreta		
DOCU 1. Corporatio	MENT # 7682		(6)					
INC.	PETERSON VOCATION			ion, .				
Principal Plac 315 IVYLGAIL C ACKSONVILLE I	DRIVE EAST	2315	ling Address IVYLGAIL DRIVE EAST SONVILLE FL 32225-20					
					05	incorporated or Qualified	3a. Date of Last 03/08/19	Report 96
2. Principal P	lace of Business	2a. 1 26	Mailing Address		4. FEI N	umber -2637245		pplied For ot Applicat
Suite, Apt.	#, etc.		Suite, Apt. #, etc.			cate of Status Desired	F1 \$8.75	Additional
2 City & State	e	27	City & State		6. Election	on Campaign Financing		lequired May Be
3 Zip	Country	28	<b>Z</b> ıp	Country	Trust	Fund Contribution	Added	to Fees
ā] <sup>Zip</sup>	26	29	ыр	30		orporation has liability for i a Statutes	Intangible tax under i Yes XX No	s. 199.032,
JÄCKSON	NETT REGENCY TOWER WILLE FL 32211 to the provisions of Sections 6 egistered agent, or both, in the m familiar with, and accept the	17.0502 and 617 a State of Florida a obligations of, s	7.1508, Florida Statute 1. Such change was a Soction 617.0503, Flo	83 84 City es, the above-named authorized by the corr prida Statutes.	Address (P.O. Bo			Code its registere
JÁCKSON 11. Pursuant f office or r agent. I a SIGNATURE	VILLE FL 32211 to the provisions of Sections 6 egistered agent, or both, in the m familiar with, and accept the Signature, typed or printed name of regist	tered agont and title if a	applicable. (NOTI	84 City es, the above-named authorized by the corporida Statutes.	corporation subm poration's board c	its this statement for the p f directors. I hereby accep	PL purpose of changing of the appointment as DATE	its register registerer
JÁCKSON 11. Pursuant f office or re agent. I at SIGNATI IRE	to the provisions of Sections 6 egistered agent, or both, in the m familiar with, and accept the signature, typed or printed name of regist OFFICEF		applicable. (NOTI	<b>84</b> City es, the above-named authorized by the corporate orida Statutes.	corporation subm poration's board c required when reinstatin ADDITI	its this statement for the p f directors. I hereby accep ø ONS/CHANGES TO OFFIC	DATE	its registere s registered RS IN 12
JÁCKSON 11. Pursuant i office or m agent. I al SIGNATURE 12. 12. TITLE NAME STREET ADORESS	VILLE FL 32211 to the provisions of Sections 6 egistered agent, or both, in the m familiar with, and accept the Signature, typed or printed name of regist OFFICEF PD_ MCINNIS, EDWIN L 4709 MARSH HAMMOCK	tered agent and litte if a	applicable. (NOTI ORS	84     City       ess, the above-named authorized by the corporation orida Statutes.     Enclosed Agent signature       13.     1.1 TiTLE       1.2 NAME     1.3 STREET ADDRESS	corporation subm poration's board o required when reinstatin Data ADDITI B255°F80	its this statement for the p f directors. I hereby accep	DATE DATE DATE DATE DATE DATE DATE DATE	its registere s registered RS IN 12
JÄCKSON 11. Pursuant i office or ri- agent. I al SIGNATURE _ 12. 11. STITLE NAME STREET ADORESS CITY-ST-ZIP	VILLE FL 32211 to the provisions of Sections 6 egistered agent, or both, in the m familiar with, and accept the Signature, typed or printed name of regist OFFICEF PD MCINNIS, EDWIN L 4709 MARSH HAMMOCK JACKSONVILLE FL D	tered agent and litte if a	applicable. (NOTI ORS	84     City       ess, the above-named authorized by the corporation orida Statutes.     Englistered Agent signature       13.     1.1 TRLE       1.1 TRLE     1.2 NAME	corporation subm poration's board of required when reinstain DADDITI BEESTES Jackson	nits this statement for the p f directors. I hereby accept on ONS/CHANGES TO OFFIC n, Rina ttsburg Planta ville, FL 3221	DATE DATE DATE DATE DATE DATE DATE DATE	its registere s registere RS IN 12
JACKSON 11. Pursuant i office or re agent. I al SIGNATURE 12. 11. STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	VILLE FL 32211 to the provisions of Sections 6 egistered agent, or both, in the m familiar with, and accept the Signature, typed or printed name of regist OFFICEF PD	tered agent and little if a		84     City       ess, the above-named authorized by the corport orida Statutes.     Interpret Englishered Agent signature       13.     1.1 TiTLE       1.2 NAME     1.3 STREET ADDRESS       1.4 CITY-ST-ZIP     2 1 TITLE       2.3 STREET ADDRESS     2.3 STREET ADDRESS	corporation subm poration's board of required when reinstall ADDITI B253°F8 Jackson Jackson J9bn F:	wits this statement for the p f directors. I hereby accept MONS/CHANGES TO OFFIC DIS/CHANGES TO OFFIC DIS Ring Planta	DATE DATE DATE DERS AND DIRECTO Change Change	its registere s registere RS IN 12 X Addi
JACKSON 11. Pursuant i office or reagent. Lai SIGNATURE 12. 12. 11. STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	VILLE FL 32211 to the provisions of Sections 6 egistered agent, or both, in the m familiar with, and accept the Signature, typed or printed name of regist OFFICEF PD	tered agent and Itile II RS AND DIRECT & DR EAST AST		84     City       ess, the above-named authorized by the corported Statutes.     Intervention       E Registered Agent signature     13.       1.1 TiTLE     1.2 NAME       1.3 STREET ADDRESS     1.4 CITY-ST-ZIP       2.1 TITLE     2.3 STREET ADDRESS       2.3 STREET ADDRESS     2.4 CITY-ST-ZIP       3.1 TITLE     3.1 TITLE	corporation subm poration's board of required when reinstall Data Beter So Jackson John Fr Jackson D/S/T	hits this statement for the p f directors. I hereby accept ONS/CHANGES TO OFFIC n, Rina ttsburg Planta ville, FL 3221 Holechek udential Drive ville, FL 3220	DATE DATE DATE DERS AND DIRECTO Change Change	its registere registere RS IN 12 <b>X</b> Addii
JACKSON 11. Pursuant i office or r agent. I al SIGNATURE 12. 12. 11. STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP	VILLE FL 32211 to the provisions of Sections 6 egistered agent, or both, in the m familiar with, and accept the Signature, typed or printed name of regist OFFICEF PD_ MCINNIS, EDWIN L 4709 MARSH HAMMOCK JACKSONVILLE FL D MILLS, ERIC R 5007 DIAN WOOD DR EA JACKSONVILLE FL	tered agent and Itile II RS AND DIRECT & DR EAST AST		84     City       ess, the above-named authorized by the corported Statutes.     Image: Corported Frequencies       13.     Image: Corported Table     Image: Corported Table       1.1 TiTLE     1.2 NAME     Image: Corported Table     Image: Corported Table       1.3 STREET ADDRESS     1.4 CITY-ST-ZIP     Image: Corported Table	corporation subm poration's board of ADDITI Peterson Jackson John Fr Jackson D/S/T Jean Au 2315 Iv	hits this statement for the p f directors. I hereby accept ONS/CHANGES TO OFFIC n, Rina ttsburg Planta ville, FL 3221 Holechek udential Drive ville, FL 3220	DATE DATE DATE DATE DERS AND DIRECTO Change Change D7 Change	its registered registered RS IN 12 <b>X</b> Addit
JACKSON 11. Pursuant i office or i agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE	VILLE FL 32211 to the provisions of Sections 6 egistered agent, or both, in the m familiar with, and accept the Signature, typed or printed name of regist OFFICEF PD	tered agent and Itile II RS AND DIRECT & DR EAST AST		84 City   ess, the above-named authorized by the corport orida Statutes.   E Registered Agent signature   13.   1.1 TiTLE   1.2 NAME   1.3 STREET ADDRESS   1.4 CITY-ST-ZIP   2.1 TITLE   2.3 STREET ADDRESS   2.4 CITY-ST-ZIP   3.1 TITLE   3.2 NAME   3.3 STREET ADDRESS   3.4 CITY-ST-ZIP   3.1 TITLE   3.2 NAME   3.3 STREET ADDRESS   3.4 CITY-ST-ZIP   4.1 TITLE	corporation subm poration's board of ADDITI Peterson Jackson John Fr Jackson D/S/T Jean Au 2315 Iv	hits this statement for the p f directors. I hereby accept ons/CHANGES TO OFFIC n, Rina ttsburg Planta ville, FL 3221 Holechek udential Drive ville, FL 3220 stell ylgail Drive E	DATE DATE DATE DATE DERS AND DIRECTO Change Change D7 Change	its registere registered RS IN 12 K Addit K Addit
JACKSON 11. Pursuant i office or r agent. I al SIGNATURE 12. 11. STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	to the provisions of Sections 6 egistered agent, or both, in the m familiar with, and accept the Signature, typed or printed name of regist OFFICEF PD	tered agent and Itile II RS AND DIRECT & DR EAST AST		84     City       ess, the above-named authorized by the corported Statutes.     Interpreted In	corporation subm poration's board of ADDITI Peterson Jackson John Fr Jackson D/S/T Jean Au 2315 Iv	hits this statement for the p f directors. I hereby accept ons/CHANGES TO OFFIC n, Rina ttsburg Planta ville, FL 3221 Holechek udential Drive ville, FL 3220 stell ylgail Drive E	DATE DATE DATE DERS AND DIRECTO Change Change Change D7 Change	Its registered registered RS IN 12 X Addit
JACKSON 11. Pursuant i office or i agent. I a SIGNATURE 12. TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME	VILLE FL 32211 to the provisions of Sections 6 egistered agent, or both, in the m familiar with, and accept the Signature, typed or printed name of regist OFFICEF PD	tered agent and Itile II RS AND DIRECT & DR EAST AST		84 City   ess, the above-named authorized by the corr prida Statutes.   E Registered Agent signature   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   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	corporation subm poration's board of ADDITI Peterson Jackson John Fr Jackson D/S/T Jean Au 2315 Iv	hits this statement for the p f directors. I hereby accept ons/CHANGES TO OFFIC n, Rina ttsburg Planta ville, FL 3221 Holechek udential Drive ville, FL 3220 stell ylgail Drive E	DATE DATE DATE DERS AND DIRECTO Change Change Change D7 Change	Its registered registered RS IN 12 K Addit K Addit
JACKSON 11. Pursuant i office or i agent. I ai SIGNATURE 12. TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP	VILLE FL 32211 to the provisions of Sections 6 egistered agent, or both, in the m familiar with, and accept the Signeture, typed or printed name of regist OFFICEF PD.; MCINNIS, EDWIN L 4709 MARSH HAMMOCK JACKSONVILLE FL D MILLS, ERIC R 5007 DIAN WOOD DR E/ JACKSONVILLE FL D JOHNSTON, RICHARD E 33 MANRESA ROAD ST AUGUSTINE FL VD RIGSBY, DAVID 8417 SANCHEZ ROAD JACKSONVILLE FL D GIBSON, HAROLD 5133 SOUTEL DRIVE	tered agent and Itile II RS AND DIRECT & DR EAST AST	Applicable (NOTI ORS	84 City   ess, the above-named authorized by the corport orida Statutes. Image: Corport Provide Statutes.   13. 1.1 Title   1.2 NAME 1.3 STREET ADDRESS   1.4 CITY-ST-ZIP 2.1 TITLE   2.3 STREET ADDRESS 2.4 CITY-ST-ZIP   3.1 TITLE 3.2 NAME   3.3 STREET ADDRESS 3.4 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 3.4 CITY-ST-ZIP   4.1 TITLE 4.2 NAME   4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	corporation subm poration's board of ADDITI Peterson Jackson John Fr Jackson D/S/T Jean Au 2315 Iv	hits this statement for the p f directors. I hereby accept ons/CHANGES TO OFFIC n, Rina ttsburg Planta ville, FL 3221 Holechek udential Drive ville, FL 3220 stell ylgail Drive E	DATE DATE DATE DATE DATE DATE DATE DATE	Its registered registered RS IN 12 K Addit K Addit
JACKSON 11. Pursuant i office or i agent. I ai SIGNATURE 12. TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME	VILLE FL 32211 to the provisions of Sections 6 egistered agent, or both, in the m familiar with, and accept the Signature, typed or printed name of regist OFFICEF PD	tered agent and Itile II RS AND DIRECT & DR EAST AST	Applicable (NOTI ORS	84 City   ess, the above-named authorized by the correct orida Statutes.   E Registered Agent signature   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   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	corporation subm poration's board of ADDITI Peterson Jackson John Fr Jackson D/S/T Jean Au 2315 Iv	hits this statement for the p f directors. I hereby accept ons/CHANGES TO OFFIC n, Rina ttsburg Planta ville, FL 3221 Holechek udential Drive ville, FL 3220 stell ylgail Drive E	DATE DATE DATE DATE DATE DATE DATE DATE	Its registered registered RS IN 12 K Addit K Addit Addit
JACKSON 11. Pursuant i office or i agent. I ai SIGNATURE 12. TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP	VILLE FL 32211 to the provisions of Sections 6 egistered agent, or both, in the m familiar with, and accept the Signature, typed or printed name of regist OFFICEF PD	tered agent and little if a RS AND DIRECT	Applicable (NOTI ORS	84   City     ess, the above-named authorized by the correct authorized by	corporation subm poration's board of ADDITI Peterson Jackson John Fr Jackson D/S/T Jean Au 2315 Iv	hits this statement for the p f directors. I hereby accept ons/CHANGES TO OFFIC n, Rina ttsburg Planta ville, FL 3221 Holechek udential Drive ville, FL 3220 stell ylgail Drive E	PL purpose of changing DATE Change	Its registered registered RS IN 12 K Addit K Addit
JACKSON 11. Pursuant i office or in agent. I al SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	VILLE FL 32211 to the provisions of Sections 6 egistered agent, or both, in the m familiar with, and accept the Signature, typed or printed name of regist OFFICEF PD.; MCINNIS, EDWIN L 4709 MARSH HAMMOCK JACKSONVILLE FL D MILLS, ERIC R 5007 DIAN WOOD DR EA JACKSONVILLE FL D JOHNSTON, RICHARD E 33 MANRESA ROAD ST AUGUSTINE FL VD RIGSBY, DAVID 8417 SANCHEZ ROAD JACKSONVILLE FL D GIBSON, HAROLD 5133 SOUTEL DRIVE JACKSONVILLE FL D	tered agent and little if a RS AND DIRECT	Applicable (NOTI ORS	84 City   ess, the above-named authorized by the correct orida Statutes.   E Registered Agent signature   13.   1.1 Trille   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   3.1 TITLE   3.2 NAME   3.3 STREET ADDRESS   3.4 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   5.1 TITLE   5.2 NAME   5.3 STREET ADDRESS   5.4 CITY-ST-ZIP   5.1 TITLE   5.4 CITY-ST-ZIP   6.1 TITLE	corporation subm poration's board of ADDITI Peterson Jackson John Fr Jackson D/S/T Jean Au 2315 Iv	hits this statement for the p f directors. I hereby accept ons/CHANGES TO OFFIC n, Rina ttsburg Planta ville, FL 3221 Holechek udential Drive ville, FL 3220 stell ylgail Drive E	PL purpose of changing DATE Change	its registere s registerec