ME     WOLF, GREGORY     12 NAME       S00 W. MAIN STREET     13 STREET ADDRESS       LOUISVILLE KY     14 CITY-ST-ZIP       LE     S     DELETE       S00 W. MAIN STREET     12 NAME       LE     S       ME     KROGER, JOAN O.       S00 W. MAIN STREET     23 STREET ADDRESS       S00 W. MAIN STREET     23 STREET ADDRESS       IN-ST-ZIP     LOUISVILLE KY       LOUISVILLE KY     24 CITY-ST-ZIP       ILE     VO       ME     BAUERNFEIND, GEORGE       S00 W. MAIN STREET     23 STREET ADDRESS       LOUISVILLE KY     24 CITY-ST-ZIP       ILE     VO       ME     BAUERNFEIND, GEORGE       S00 W. MAIN STREET     33 STREET ADDRESS       S00 W. MAIN STREET     33 STREET ADDRESS       S00 W. MAIN STREET     34 CITY-ST-ZIP       LOUISVILLE KY     34 CITY-ST-ZIP       LOUISVILLE KY     34 CITY-ST-ZIP       LE     VPD     DELETE       MER ADDRESS     500 WEST MAIN ST       KER ADDRESS     43 STREET ADDRESS       JOUISVILLE FL     41 ITLE       LOUISVILLE FL     41 OITLE       MER ADDRESS     500 WEST MAIN ST       KRET ADDRESS     500 WEST MAIN ST       LOUISVILLE FL     10 ELETE	COR ANNU	E NOW: FILING FE PROFIT RPORATION JAL REPORT 1998	E AFTER	FLORIDA DEP# <b>Sandra</b>	RTMENT O B. Mortha ary of State	F STATE m		F May 14 Secreta		8 8:	
Mailing Address     Mailing Address       0. BOX MODE ATIN: TAX DEPT. UX IY 4001-4426     SO MEST AWA STRET P.O. BOX MODE ATIN: TAX DEPT. UX IY 4001-4426     DO NOT WHITE IN THIS SPACE       3. BOX MODE ATIN: TAX DEPT. UX IY 4001-4426     SO BOX MODE ATIN: TAX DEPT. UX IY 4001-4426     DO NOT WHITE IN THIS SPACE       3. BOX MODE ATIN: TAX DEPT. UX IY 4001-4426     SO BOX MODE ATIN: TAX DEPT. UX IY 4001-4426     DO NOT WHITE IN THIS SPACE       3. BOX MODE ATIN: TAX DEPT. UX IY 4001-4426     So Box Monther III AND INFORMATION INFOL	Corporation	n Name		(5)							
Principal Place of Breakness         Ja.         Main in Address         A. FEI Number         Applied For           Sulle, Apr. #, etc         28         Sole, Apr. #, etc         Clip & Sole         Clip & Sole         Sole, Apr. #, etc         E. Certificate of Sole, Desked         Sole, Apr. #, etc           City & Sole         21         Clip & Sole         E. Certificate of Sole, Desked         Sole, Apr. #, etc         E. Certificate of Sole, Desked         For Applicable           Zig         28         Clip & Sole         Clip & Sole         E. Certificate of Sole, Desked         For Applicable           Zig         29         29         B.         Country         E. The corporation ower on the paid the current prive intemption           NSURANCE COMMISSIONER         29         B.         Name         Street Address of Current Registered Agent         No.           NSURANCE COMMISSIONER         29         Street Address (P.O. Box Number is Not Acceptable)         BI           TALLAHASSEE FL. FL         29         Street Address (P.O. Box Number is Not Acceptable)         BI           Registered agence, a testin, in the State of Flocks, Educi clarge was auth order docrapation submits this statement for the popolitiment as registered agence, a testin, in the State of Flocks, Educi clarge was auth order of popolitics based of declares. Thereby accept the appointment as registered agence, a testin, in the State of Flocks, Educi clarge was auth	0 west ma .0. Box 740 00 ky 40201	ain street 1026  Attn: Tax Dept.	500 P.O LOL	WEST MAIN STREE				DO NOT WRIT 3. Date Incorporated or Qualified			I <b>BIB</b> H IBBH
Sulle, Apl. #, elc     20     A3-06335350     Mol Applicative       Sulle, Apl. #, elc     2     Suite, Apl. #, elc     2     Suite, Apl. #, elc     5       City & State     6     Certificate of State, Desired     \$80.75 Assignment     \$80.8000000       City & State     6     Election Cempaging Fnancing     \$5.00 May Be       Zo     Country     20     Country     8     The corporation cances or has bald the currey year interpible       Zo     Country     20     Restate and Address of Current Registered Agent     10. Name and Address of New Pagitatered Agent     10. Name and Address of New Pagitatered Agent       INSURANCE COMMISSIONER     51     Name     1     Name and Address of Current Registered Agent     10. Name and Address of New Pagitatered Agent       INSURANCE COMMISSIONER     51     Name     1     Name and Address of New Pagitatered Agent       State OF FLORIDA, CAPITOL BUILDING     18     State OF FLORIDA, CAPITOL BUILDING     18       Tables of the indicate of the New Pagetater Address (P.O. Box Number is Not Acceptable)     18     Name and Address of New Pagetater Agent       State OF FLORIDA, CAPITOL BUILDING     18     10     Name and Address of New Pagetater Agent     10       Address of the indicater of the New Pagetater Agent the indicater	Principal Pl	lace of Business	20	Agilunci Address							nlind For
City & State     City & Country     Zip     Zip     Country     Zip     Zip     Country     Zip     Z			26								÷
City & State       City & State       Ety & State       Ety & State       State       State       State       State       State       Total Fund Contribution       Addets to Feas         ZP       ZP       ZP       ZP       ZP       ZP       State       State       State       State       State       State       State       Total Fund Contribution       Addets to Feas         ZP       ZP       ZP       ZP       ZP       ZP       State       S	Sulte, Apt. (	#, elc.		Buite, Apt. #, otc.				5. Certificate of Status Desired			
Zpp         Country         Zp         Country         Zp         Country         R         This corporation owes or has paid the current year intangable prevail intangable prevail intercent year intangable           B. Name and Address of Current Registered Agent         IN Name and Address of New Registered Agent         IN Name and Address of New Registered Agent         No           INSURANCE COMMISSIONER         State of FLORIDA, CAPITOL BUILDING           Table Address of Corporation submits this statement to the provisions of Sections 070 (500 and 607 1506, Florida Statutos, the above named corporation's board of directors. I hereby accept the objection of Section 070 (500, Florida Statutos)         State of Carity         FL         Is state of Florida. State Florid	City & State	e		City & State						\$5.00	May Be
9. Name and Address of Current Registered Agent     10. Name and Address of New Registered Agent       INSURANCE COMMISSIONER STATE OF FLORIDA, CAPTOL BUILDING TALLAHASSEE FL FL     11       82     Street Address (P.O. Box Number is Not Acceptable)       83     84       64     City       Fursuant to the provisions of Sections 602.0502 and 602.1508, Horida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered the officiants of Sections 502.0502 and 602.1508, Horida Statutes, the above-named corporation above of directors. Thereby accept the objections of Sections 50.2000 and 602.1508, Horida Statutes, the above-named corporation above of directors. Thereby accept the objective of the object	Zip		7	ζip		lry		8. This corporation owes or has p	aid the currer	<b>x</b> year Int	angible
STATE OF FLORIDA, CAPITOL BUILDING   STATE OF FLORIDA, CAPITOL BUILDING   TALLAHASSEE FL FL     B4   City   FL B5   Zip Code     Parsuant to the provisions of Soctors C07 0002 and f021 1508, Florida Statulos, the above-named corporation submits his statement for the pupples of changing its registered opent, on handling with, and accept the change was authorized by the corporation submits his statement for the pupples of changing its registered opent, on handling with, and accept the change was authorized by the corporation's board of directors. Thereby accept the appointment as registered opent, on handling with, and accept the change was authorized by the corporation's board of directors. Thereby accept the appointment as registered opent, on handling with, and accept the change was authorized by the corporation's board of directors. Thereby accept the appointment as registered opent opent and with and accept the change was authorized by the corporation's board of directors. Thereby accept the appointment as registered opent open				red Agent		H Nama		10. Name and Address of New R	egistered Ag	ent	
TALLAHASSEE FL FL       TALLAHASSEE FL FL       Bit of the Address (F O: Dak Notice Is Not Address I)       Bit of the Address I for the Address I fore							Addeed	va (B.O. Rey Number is Not Assertio			
Put suant to the provisions of Sections 607 0600° and 607 1508, Trontide Statutes. The above named composition submits this statement for the purpose of changing its registered genet. Lam taminaria the Statute of Fields. Such change was authorized by the corporation's board of directors. Thereby accept the obligations of Section 07 0500° and 607 1508, Frontide Statutes.           INATURE         Expanse speed clam directors of section 07 0500° and 607 1508. Forded Statutes.         DAte         DAte           INATURE         Spanse speed clam directors of section 07 0500° and 607 to above respeed was remained.         DAte         DAte           INATURE         Spanse speed clam directors of section 07 0500° and 300 directors.         DAte         DAte           INATURE         Spanse speed clam directors of section 07 0500° and 300 directors.         Date         DAte           INATURE         PD         OFFICE IRS AND Direct Claiss         DBLETE         11 The           Isset clamases         South AN STREET         12 NMAE         Isset clamases         Isset clamases           Strate Address         South ANN STREET         23 STREET ADDRESS         Isset clamases         Image         Addition           Strate Address         South ANN STREET         23 STREET ADDRESS         Image         Addition           Strate Address         South ANN STREET         23 STREET ADDRESS         Image         Addition           Strate Address								ss (m.O. box number is Not Accepta			
Pursuant to the provisions of Sections 607.0502 and 607.1508. Torida Statutos. In e above-named corporation submits this statement for the purpose of changing its registered agent. and laccept the obligations of. Section 607.0502. Florida Statutos. The economic solar of directors. Thereby accept the appointment as registered agent. and laccept the obligations of. Section 607.0505. Florida Statutos. The economic solar of directors. Thereby accept the appointment as registered agent. and laccept the obligations of. Section 607.0505. Florida Statutos. Thereby accept the appointment as registered agent. and laccept the obligations of. Section 607.0505. Florida Statutos. Thereby accept the appointment as registered agent. and laccept the obligations of. Section 607.0505. Florida Statutos. The economic solar of directors. Thereby accept the appointment as registered agent. and laccept the obligations of. Section 607.0505. Florida Statutos. The economic solar of directors. Thereby accept the appointment as registered agent. and laccept the obligations of. Section 607.0505. Florida Statutos. The economic solar of the provision of the p					14	60					
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LE       PD       DELETE       1.1 TITLE       I.1 TITLE       I.1 TITLE         MEE       WOLF, GREGORY       I.1 TITLE       1.2 NAME       I.1 STREET ADDRESS         LOUISVILLE KY       I.1 TITLE       1.3 STREET ADDRESS       I.1 TITLE       I.1 TITLE         LOUISVILLE KY       IDELETE       2.1 TITLE       I.1 TITLE       I.1 TITLE         MEE       Street ADDRESS       IDELETE       2.1 TITLE       III CAN A A A A, JO A N O.         V-ST-ZP       LOUISVILLE KY       IDELETE       2.1 TITLE       III CAN A A A, JO A N O.         V-ST-ZP       LOUISVILLE KY       IDELETE       3.1 TITLE       IIII CAN A A A, JO A N O.         V-ST-ZP       LOUISVILLE KY       IDELETE       3.1 TITLE       IIIII CAN A A A, JO A N O.         V-ST-ZP       LOUISVILLE KY       IDELETE       3.1 TITLE       IChange       Addition         WEE       MURRAY, JAMES E       3.1 STREET ADDRESS       3.2 NAME       IIIII E       IChange       Addition         WEE       V-ST-ZP       IDELETE       3.1 TITLE       3.2 NAME       IIII E       IIIII E       IChange       Addition         WEE       MURRAY, JAMES E       STREET ADDRESS       3.2 NAME       IIIII E       IIIIIIIE       IIIIIIIIE       IIIIIIII	Pursuant to	to the provisions of Sections 66 egistered agent, or both, in the	07.0502 and 607 State of Florida	1508, Florida Statu Such change was	E	14 City	corpoi	ration submits this statement for the n's board of directors. I hereby acce	FL	,	
REET ADDRESS       500 W. MAIN STREET LOUISVILLE KY       13 STREET ADDRESS         LE       S       DELETE       21 TILE         REET ADDRESS       SO0 W. MAIN STREET       23 STREET ADDRESS         LOUISVILLE KY       24 CITY-ST-ZIP         LE       VD       DELETE         V-ST-ZIP       LOUISVILLE KY         LE       VD         V-ST-ZIP       DELETE         LUUISVILLE KY       24 CITY-ST-ZIP         LE       VD         ME       BAUERNFEIND, GEORGE         SO0 W. MAIN STREET       33 STREET ADDRESS         LOUISVILLE KY       24 CITY-ST-ZIP         LOUISVILLE KY       24 CITY-ST-ZIP         LOUISVILLE KY       34 CITY-ST-ZIP         V+ST-ZIP       DELETE         WE       MURRAY, JAMES E         SOO W. MAIN STREET       33 STREET ADDRESS         JOUISVILLE FL       44 CITY-ST-ZIP         V+ST-ZIP       Change         MEET ADDRESS       500 WEST MAIN ST         LOUISVILLE FL       10 ELETE         ST-ZIP       Change         VPD       DELETE         MEET ADDRESS       500 W MAIN ST         LOUISVILLE FL       SA CITY-ST-ZIP         LE	GNATURE	Signature typed or protect risk e of repst	ered agent and title if a	apy J-calske (NC	ites, the abd authorized lorida Statu	4 City ove-named by the cor les.		when reinstating)	PL purpose of ch pt the appoir	nanging it atment as	s registered registered
Y-ST-2IP       LOUISVILLE KY       14 CITY-ST-2IP         LE       S       DELETE       21 TITLE         ME       KROGER, JOAN O.       23 STREET ADDRESS         500 W. MAIN STREET       23 STREET ADDRESS         LOUISVILLE KY       24 CITY-ST-2IP         LE       VD       DELETE         ME       BAUERNFEIND, GEORGE       31 TITLE         WE       BAUERNFEIND, GEORGE       32 NAME         Stoo W. MAIN STREET       33 STREET ADDRESS         LOUISVILLE KY       24 CITY-ST-2IP         LOUISVILLE KY       24 CITY-ST-2IP         WE       BAUERNFEIND, GEORGE         Stoo W. MAIN STREET       33 STREET ADDRESS         LOUISVILLE KY       34 CITY-ST-2IP         LOUISVILLE KY       34 CITY-ST-2IP         LOUISVILLE KY       34 CITY-ST-2IP         VFD       DELETE       41 TITLE         WE MURRAY, JAMES E       42 NAME         500 WEST MAIN ST       43 STREET ADDRESS         LOUISVILLE FL       44 GITY-ST-2IP         LE       SVPD       DELETE         ME MCALLISTER, MICHAEL B       53 STREET ADDRESS         S00 W MAIN ST       53 STREET ADDRESS         LOUISVILLE FL       54 CITY-ST-2IP	GNATURE	Signature typed or protect name of recent OFFICLF PD	ered agent and title if a	applicable (NC ORS	Itos, the abd authorized korida Statu	14 City ove-named by the cor les.		when reinstating)	PL purpose of ch pt the appoir DATE CERS AND D	nanging it itment as	s registered registered
EE       S       DELETE       21 TITLE       DELETE       21 TITLE         AE       KROGER, JOAN O.       SOO W. MAIN STREET       23 STREET ADDRESS       23 STREET ADDRESS         LOUISVILLE KY       DELETE       31 TITLE       DELETE       31 TITLE         AE       BAUERNFEIND, GEORGE       32 STREET ADDRESS       24 CITY-ST-ZIP       DeleTE       31 TITLE         AE       BAUERNFEIND, GEORGE       32 STREET ADDRESS       10 ELETE       31 TITLE       10 Change       Addition         AE       BAUERNFEIND, GEORGE       32 STREET ADDRESS       10 ELETE       31 TITLE       10 Change       Addition         AE       BAUERNFEIND, GEORGE       32 STREET ADDRESS       10 ELETE       31 TITLE       10 Change       Addition         AE       BAUERNFEIND, GEORGE       32 STREET ADDRESS       10 ELETE       31 TITLE       10 Change       Addition         AE       BAUERNFEIND, GEORGE       32 STREET ADDRESS       10 ELETE       11 TITLE       10 Change       Addition         AE       VPD       DELETE       41 TITLE       10 Change       Addition         AE       SOO WEST MAIN ST       43 STREET ADDRESS       10 Change       Addition         AE       SVPD       DELETE       51 TITLE	GNATURE 	Signature typed in protect same of reacting OFFICEF WOLF, GREGORY	ered agent and title if a	applicable (NC ORS	itos, the abc authorized torida Statu 11: Registered / 13. 1.1 TITL 1.2 NAM	Ve-named by the contest.		when reinstating)	PL purpose of ch pt the appoir DATE CERS AND D	nanging it itment as	s registered registered S IN 12
BEET ADDRESS       500 W. MAIN STREET       2.3 STREET ADDRESS         LOUISVILLE KY       DELETE       3.1 TITLE         LE       VD       DELETE       3.1 TITLE         AE       BAUERNFEIND, GEORGE       3.2 NAME         SOO W. MAIN STREET       3.3 STREET ADDRESS         V-ST-ZIP       LOUISVILLE KY       3.4 CITY-ST-ZIP         LOUISVILLE KY       3.4 CITY-ST-ZIP         E       VPD       DELETE         AE       MURRAY, JAMES E       4.1 TITLE         ET ADDRESS       500 WEST MAIN ST       4.2 NAME         EET ADDRESS       500 WEST MAIN ST       4.3 STREET ADDRESS         LOUISVILLE FL       4.1 TITLE       Change       Addition         AE       WURRAY, JAMES E       4.2 NAME       4.2 NAME         EET ADDRESS       500 WEST MAIN ST       4.3 STREET ADDRESS	GNATURE .E ./E .EET ADDRESS	TPD WOLF, GREGORY 500 W. MAIN STREET	ered agent and title if a	applicable (NC ORS	Itos, the abd authorized forida Statu 11: Registered / 13. 1.1 TITL 1.2 NAM 1.3 STR	City     Ve-named     by the contest     contest		when reinstating)	PL purpose of ch pt the appoir DATE CERS AND D	nanging it itment as	s registered registered S IN 12
Y-ST-2IP       LOUISVILLE KY       2.4 CITY-ST-2IP         LE       VD       DELETE       31 TITLE         ME       BAUERNFEIND, GEORGE       32 NAME         WET ADDRESS       500 W. MAIN STREET       33 STREET ADDRESS         Y-ST-2IP       LOUISVILLE KY       34. CITY-ST-2IP         LE       VPD       DELETE       41 TITLE         WE       MURRAY, JAMES E       42 NAME         WE       MURRAY, JAMES E       42 NAME         SOO WEST MAIN ST       43 STREET ADDRESS         LOUISVILLE FL	GNATURE LE ME REET ADDRESS Y-ST-ZIP	Signature typed to proted tial if of teach OFFICEF WOLF, GREGORY 500 W. MAIN STREET LOUISVILLE KY 5	ered agent and title if a	ang Acatole (NC ORS DELETE	Itos, the abd authorized forida Statu 11: Registered / 13. 1.1 TITL 1.2 NAM 1.3 STR 1.4 CITN	A City Dive-named by the cor- tes. Agent signature E E E E E E E E E E E E E	e recjuered	when reinstaling) ADDITIONS/CHANGES TO OFFI	DATE CERS AND D	IRECTOR	s registered registered S IN 12
E       VD       DELETE       3.1 TITLE       Change       Addition         AE       BAUERNFEIND, GEORGE       3.2 NAME       3.3 STREET ADDRESS       3.3 STREET ADDRESS         GET ADDRESS       500 W. MAIN STREET       3.3 STREET ADDRESS       3.4 CiTY-ST-ZIP       Change       Addition         AE       VPD       DELETE       3.4 CiTY-ST-ZIP       DELETE       3.4 CiTY-ST-ZIP         E       VPD       DELETE       4.1 TITLE       Change       Addition         AE       MURRAY, JAMES E       4.2 NAME       2.0 MAIN ST       4.3 STREET ADDRESS         FET ADDRESS       500 WEST MAIN ST       4.3 STREET ADDRESS       4.4 CiTY-ST-ZIP         LOUISVILLE FL	GNATURE LE ME LE ADDRESS Y-ST-ZIP LE ME	Signature word or proted tial in of reach OFFICEF WOLF, GREGORY 500 W. MAIN STREET LOUISVILLE KY S KROGER, JOAN O.	ered agent and title if a	ang Acatole (NC ORS DELETE	Itos, the ab authorized lorida Statu 11: Registered / 13. 1.1 TITL 1.2 NAN 1.3 STR 1.4 CITN 2.1 TITL 2.2 NAN	A City Sve-named by the cor- les. Apont signature E E E E E E E E E E E E E	e recjuered	when reinstaling) ADDITIONS/CHANGES TO OFFI	DATE CERS AND D	IRECTOR	s registered registered S IN 12
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Image: Constraint of the second se	E AE EET ADDRESS (-ST-ZIP E EEET ADDRESS (-ST-ZIP E E	Signature typed or prefer half of tradet OFFICEF PD WOLF, GREGORY 500 W. MAIN STREET LOUISVILLE KY S KROGER, JOAN O. 500 W. MAIN STREET LOUISVILLE KY VD	ered agent and title (Le	ang Acatike (NC ORS DELETE DELETE	Itos, the abc authorized forida Statu 16: Registered / 13. 1.1 TITL 1.2 NAM 1.3 STR 1.4 CITM 2.1 TITL 2.2 NAM 2.3 STR 2.4 CIT 3.1 TITL	A City Sve-named by the con- tes. Agent sonature E E E E E E E E E E E E E	e recjuered	when reinstaling) ADDITIONS/CHANGES TO OFFI	PL purpose of ct ppt the appoin DATE CERS AND D	nanging it itment as IRECTOR Change	s registered
VPD     DELETE     41 title       MURRAY, JAMES E     DELETE       Structure     MURRAY, JAMES E       Structure     42 NAME       42 NAME       43 STREET ADDRESS       LOUISVILLE FL       LE     SVPD       DELETE     5.1 TITLE       ME     MCALLISTER, MICHAEL B       Structure     5.3 STREET ADDRESS       LOUISVILLE FL     5.4 CITY-ST-ZIP       LE     SVPD       DELETE     5.4 CITY-ST-ZIP       LE     SVPD       DELETE     5.4 CITY-ST-ZIP       LE     SVPD       LE     SVPD       DELETE     5.4 CITY-ST-ZIP       LE     SVPD       DELETE     6.1 TITLE       State     Change       Addition       KEET ADDRESS     5.3 STREET ADDRESS       LOUISVILLE FL     5.4 CITY-ST-ZIP       LE     SVPD       DELETE     6.1 TITLE       COUGHLIN, KAREN A     6.2 NAME       KEET ADDRESS     500 W MAIN ST       LOUISVILLE KY     6.3 STREET ADDRESS       SOO W MAIN ST     6.3 STREET ADDRESS       LOUISVILLE KY	GINATURE LE ME REET ADDRESS Y-ST-ZIP LE EET ADDRESS Y-ST-ZIP LE ME	Signature function prefered name of heavies OFFICEF WOLF, GREGORY 500 W. MAIN STREET LOUISVILLE KY S KROGER, JOAN O. 500 W. MAIN STREET LOUISVILLE KY VD BAUERNFEIND, GEORGI	ered agent and title (Le	ang Acatike (NC ORS DELETE DELETE	Itos, the abc authorized forida Statu 15: Registered / 13. 1.1 TITL 1.2 NAM 1.3 STR 1.4 CITY 2.1 TITL 2.2 NAM 2.3 STR 2.4 CIT 3.1 TITL 3.2 NAM	A City Sve-named by the con- tes. Appendix sphature E E E E E E E E E E E E E	e recjuered	when reinstaling) ADDITIONS/CHANGES TO OFFI	PL purpose of ct ppt the appoin DATE CERS AND D	nanging it itment as IRECTOR Change	s registered
Let ADDRESS     500 WEST MAIN ST     4 3 STREET ADDRESS       LOUISVILLE FL     44 GITY-ST-ZIP       LE     SVPD       ME     MCALLISTER, MICHAEL B       S00 W MAIN ST     52 NAME       LEET ADDRESS     500 W MAIN ST       LEET ADDRESS     53 STREET ADDRESS       SVPD     DELETE       Street ADDRESS     500 W MAIN ST       LE     SVPD       LOUISVILLE FL     54 CITY-ST-ZIP       LE     COUGHLIN, KAREN A       KEET ADDRESS     63 STREET ADDRESS       SOO W MAIN ST     63 STREET ADDRESS	GINATURE .E ME ME ME SEET ADDRESS Y-ST-ZIP LE ME ME ME ME ME ME ME	Solution from the present frame of house OFFICEF PD WOLF, GREGORY 500 W. MAIN STREET LOUISVILLE KY S KROGER, JOAN O. 500 W. MAIN STREET LOUISVILLE KY YD BAUERNFEIND, GEORGI 500 W. MAIN STREET	ered agent and title (Le	ang Acatike (NC ORS DELETE DELETE	Itos, the abc authorized forida Statu 15: Registered 13. 1.1 TITL 1.2 NAM 1.3 STR 1.4 CITM 2.1 TITL 2.2 NAM 2.3 STR 3.1 TITL 3.2 NAM 3.3 STR	A City Dive-named by the cor- tes. Agent signature E E E E E E E E E E E E E	e recjuered	when reinstaling) ADDITIONS/CHANGES TO OFFI	PL purpose of ct ppt the appoin DATE CERS AND D	nanging it itment as IRECTOR Change	s registered registered S IN 12
Y-ST-ZIP     LOUISVILLE FL     44 CiTY-ST-ZIP       LE     SVPD     DELETE     5.1 TITLE       ME     MCALLISTER, MICHAEL B     5.2 NAME       S00 W MAIN ST     5.3 STREET ADDRESS       LOUISVILLE FL     5.4 CITY-ST-ZIP       LE     SVPD     DELETE       ST-ZIP     LOUISVILLE FL     Change       LE     SVPD     DELETE       SVPD     DELETE     6.1 TITLE       LE     SVPD     DELETE       SVPD     DELETE     6.1 TITLE       WE     COUGHLIN, KAREN A     6.2 NAME       WEET ADDRESS     500 W MAIN ST     6.3 STREET ADDRESS       LOUISVILLE KY     G.3 STREET ADDRESS     1.0 UISVILLE KY	GINATURE LE ME KEET ADDRESS Y-ST-ZIP LE KEET ADDRESS Y-ST-ZIP LE ME KEET ADDRESS Y-ST-ZIP LE ME	Some word or prevent name of register OFFICEF PD WOLF, GREGORY 500 W. MAIN STREET LOUISVILLE KY S KROGER, JOAN O. 500 W. MAIN STREET LOUISVILLE KY VD BAUERNFEIND, GEORGE 500 W. MAIN STREET LOUISVILLE KY VPD	ered agent and title (Le	Anglicalste (NC ORS DELETE DELETE DELETE	Itos, the abc authorized forida Statu 15: Registered 13. 1.1 TITL 1.2 NAM 1.3 STR 1.4 CIT 2.1 TITL 2.2 NAM 2.3 STR 3.1 TITL 3.2 NAM 3.3 STR 3.4 CIT 4.1 TITL	A City Dive-named by the cor- tes. Agent signature E E E E E E E E E E E E E	e recjuered	when reinstaling) ADDITIONS/CHANGES TO OFFI	PL purpose of ct ipt the appoin DATE CERS AND D	IRECTOR Change	s registered
LE SVPD DELETE 5.1 TITLE Change Addition ME MCALLISTER, MICHAEL B 52 NAME SEET ADDRESS 500 W MAIN ST 53 STREET ADDRESS LOUISVILLE FL 54 CITY-ST-ZIP LE SVPD DELETE 61 TITLE COUGHLIN, KAREN A 62 NAME SEET ADDRESS 500 W MAIN ST 63 STREET ADDRESS LOUISVILLE FX 63 STREET ADDRESS	GNATURE LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME ME	Some word is period han edited OFFICLE WOLF, GREGORY 500 W. MAIN STREET LOUISVILLE KY S KROGER, JOAN O. 500 W. MAIN STREET LOUISVILLE KY VD BAUERNFEIND, GEORGI 500 W. MAIN STREET LOUISVILLE KY VPD MURRAY, JAMES E	ered agent and title (Le	Anglicalste (NC ORS DELETE DELETE DELETE	Itos, the abc authorized forida Statu 15: Registered 13. 1.1 TITL 1.2 NAM 1.3 STR 1.4 CITY 2.1 TITL 2.2 NAM 2.3 STR 2.4 CIT 3.1 TITL 3.2 NAM 3.3 STR 3.4 CIT 4.1 TITL 4.2 NAM	A City Dive-named by the cor- tes. Agent signature E E E E E E E E E E E E E	e recjuered	when reinstaling) ADDITIONS/CHANGES TO OFFI	PL purpose of ct ipt the appoin DATE CERS AND D	IRECTOR Change	s registered registered S IN 12 Addition
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