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indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an office of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 1 attachment with an address, with all other like empowered.	ated on this report or supplemental rep e corporation or the receiver or trustee	ort is true and accurate an empowered to execute th	id that my signature shall have t	he same legal effect as if made under oath; that I an	h an officer or director
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