2001 UNIFORM BUSINESS REPORT (UBR)

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City & State Country Zip Country Zip Country Sip Country Signature 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Name Name Name Name Street Address (P.O. Box Number is Not Acceptable) City Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code The above named entity submits this statement for the purpose of changing its registered officer or registered agent, or both, in the State of Fordia. SIGNATURE Signature of the purpose of changing its registered officer or registered agent, or both, in the State of Fordia. SIGNATURE Signature of the purpose of changing its registered officer or registered agent, or both, in the State of Fordia. SIGNATURE Signature Agent symme record agent agent in advicable Signature Agent symme record after in the purpose of changing its registered officer or registered agent, or both, in the State of Fordia. SIGNATURE Signature Agent symme record agent or both, in the State of Fordia. SIGNATURE Signature Agent symme record agent or both, in the State of Fordia. SIGNATURE Signature Agent symme record agent, or both, in the State of Fordia. SIGNATURE Signature Agent symme record agent, or both, in the State of Fordia. SIGNATURE Signature Agent symme record agent, or both, in the State of Fordia. SIGNATURE Signature Agent symme record agent, or both, in the State of Fordia. SIGNATURE Signature Agent symme record agent, or both, in the State of Fordia. SIGNATURE Signature Agent symme record agent, or both, in the State of Fordia. SIGNATURE Signature Agent symme record agent, or both, in the State of Fordia. SIGNATURE Signature Agent symme record agent, or both, in the State of Fordia. SIGNATURE Signature Agent symme record agent, or both, in the State of Fordia. Signature Agent symme record agent, or both, in the State of Fordia. Signature Agent symme record agen	<u> </u>						-	DO NOT WRIT	TE IN THIS SDA	LCE
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City FL Zip Code City FL Zip	6468 PARKLAND DRIVE					Street Address	(P.O. Box Number i	s Not Acceptable)	
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		certify that the information supplie	d with this filing does	not qualify fo	the exem	ption stated in S	ection 119.07(3)(i),	Florida Statutes.	further certify	that the information

DONALD F. MCDONOUGH GENERAL PTR.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENER/ L PARTNER

941-753-5436