	ON OR BEFORE 8/7/96: \$225 (IF DIS) PROFIT		E TO REINSTATE: \$375.) TMENT OF STATE		
	RPORATION ()		Mortham		
	JAL REPORT	· • • · · · · · · · · · · · · · · · · ·	y of State		
	1996	DIVISION OF C	CORPORATIONS		
DOCUI 1. Corporation	MENT # F3134	5 (4)			
SCENIC	C MEADOWS, INC.			I IRANIAN MAT MANI MATANIMI NIMI TITAK A	INT BIONT OTOTE CLOSE OLDSE OTOTE SHOE
Principal Place	e of Business	Mailing Address			
2917 LIVINGS 1929 SHADY	OAK DR	P.O. BOX 3456 1929 SHADY OAK DR			
tallahasse US	E FL 32303	TALLAHASSEE FL 32315 US		3. Date Incorporated or Qualified	3a. Date of Last Report
2. Principa: P	lace of Business	2a. Mailing Address		04/20/1981 4. FELNJimber	04/06/1995 Applied For
21		26		59-2081945	Not Applicable
Suite, Apt	#, etc	Suite Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	e	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
23 Zip	Country	28]	Country	8. This corporation has liability for	
24	9. Name and Address of Curre	29 29 Agent	30	Florida Statutes 10. Name and Address of New Re	Yes No
НА	ASSELL, LEONARD C		81 Name		<u> </u>
19:	29 SHADY OAK DR		82 Street Add	fress (P.O. Box Number is Not Acceptat	ole)
TA	LLAHASSEE FL 32303		83		
			[83]		
			84 City		85 Zip Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statut	84 City	poration submits this statement for the p	urpose of changing its registered
office or r	to the provisions of Sections 607.05 registered agent, or both, in the Stali im familiar with, and accept the oblig	e of Florida. Such change was a	84 City es, the above named corporat	poration submits this statement for the phon's board of directors. I hereby accept	urpose of changing its registered
office or r	registered agent, or both, in the Stali am familiar with, and docept the oblig	e of Florida. Such change was a gallons of, Section 607.0505, Flo	84 City es, the above named corporate or	non's board of directors. Thereby accep	urpose of changing its registered the appointment as registered
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SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-24-96 Captive France