L COR	DTICE: CORPORATION WILL BE D ON OR BEFORE 9/17/97: \$550 (IF DIS PROFIT RPORATION JAL REPORT	FLORIDA DEI	1 SEPTEMBER 17, 1997. T DUE TO REINSTATE: \$750. PARTMENT OF STATE B. Mortham retary of State	Aug 28	FILED 1997 8:00a tary of State
DOCUI	1997 MENT # F33583		OF CORPORATIONS		lary of Stak
Principal Place	e of Business	Mailing Address			
1323 PHILLIPS PKWY. DR. E 11323 PHILLIPS PKWY. DR. E ACKSONVILLE FL 32256 JACKSONVILLE FL 32256				DO NOT WRITE IN THIS SPACE	
				 Date Incorporated or Qualified 05/06/1981 	d 3a. Date of Last Report 06/12/1996
, Principal Pl	lace of Business	2a. Mailing Addross	· · · · ·	4. FEI Number	Applied For
Suite, Apt.	# atc	26 Suite, Apt. #, etc.		59-2051816	Not Applicabl
Suite, Apr.	# , 6 (C).	27		5. Certificate of Status Desired	Fee Required
City & State	6	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country 25	Zip 29	Country 30	 This corporation owes or has personal Property Tax due Jur 	
	9. Name and Address of Curren	nt Registered Agent		10. Name and Address of New F	
	DERSON, RAYMOND L 33 CLAIRBORO ROAD		B1 Name		
	CKSONVILLE FL 32223		82 Street Ad	dress (P.O. Box Number is Not Accept	able)
•			83		
			84 City	······································	B5 Zip Code
Pursuant (to the provisions of Sections 607.050	2 and 607 1508 Florida Str		moration submits this statement for the	
1. Pursuant (office or re agent. I a	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the oblig:	02 and 607, 1508, Florida Sta of Florida. Such change w ations of, Section 607,0505		rporation submits this statement for the accuration's board of directors. I hereby acc	
IGNATURE			atutes, the above-named co as authorized by the corpor Florida Statutes.		PL
IGNATURE	Signature, typed or printed name of registered age OFFICERS AN	ent and little # applicable. (D DIRECTORS		ulred when reinstaling)	PL
GNATURE	Signature, typed or printed name of registered age OFFICERS AN STD	ent and title if applicable. (atutes, the above-named co as authorized by the corpor Florida Statutes. NOTE Registered Agent signature req 13. 1.1 TILLE	ulred when reinstaling)	PL purpose of changing its registered pointment as registered DATE
GNATURE	Signature, typed or printed name of registered age OFFICERS AN STD ANDERSON, HELENS	ent and little # applicable. (D DIRECTORS	atutes, the above-named co as authorized by the corpor Florida Statutes. NOTE Registered Agent signature req 13. 1.1 TITLE 1.2 NAME	ulred when reinstaling)	PL
GNATURE LE ME REET ADDRESS	Signature, typed or printed name of registered age OFFICERS AN STD ANDERSON, HELENS 2963 CLAIRBORO ROAD	ent and little # applicable. (D DIRECTORS	Alutes, the above-named co as authorized by the corpor Florida Statutes. NOTE Registered Agent signature req 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	ulred when reinstaling)	PL
GNATURE LE ME REET ADDRESS I'Y-ST-ZIP	Signature, typed or printed name of registered age OFFICERS AN STD ANDERSON, HELENS	ent and little # applicable. (D DIRECTORS	atutes, the above-named co as authorized by the corpor Florida Statutes. NOTE Registered Agent signature req 13. 1.1 TITLE 1.2 NAME	ulred when reinstaling)	PL
GNATURE LE ME REET ADDRESS Y-ST-ZIP LE	Signature, typed or printed name of registered age OFFICERS ANI STD ANDERSON, HELENS 2963 CLAIRBORO ROAD JACKSONVILLE, FL 00000 PD ANDERSON, RAYMOND L.	eni and litte # applicable. (ID DIRECTORS	Alutes, the above-named co as authorized by the corpor Florida Statutes. NOTE Registered Agent signature req 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	ulred when reinstaling)	PL Approve of changing its registered appointment as registered DATE CERS AND DIRECTORS IN 12 Change Additio
GNATURE LE ME REET ADDRESS Y-ST-ZIP LE ME	Signature, typed or printed name of registered age OFFICERS ANI STD ANDERSON, HELENS 2963 CLAIRBORO ROAD JACKSONVILLE, FL 000000 PD ANDERSON, RAYMOND L. 2963 CLAIRBORO ROAD	eni and litte # applicable. (ID DIRECTORS	atutes, the above-named co as authorized by the corpor Florida Statutes. NOTE Registered Agent signature req 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE	ulred when reinstaling)	PL Approve of changing its registered appointment as registered DATE CERS AND DIRECTORS IN 12 Change Additio
GNATURE LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP	Signature, typed or printed name of registered age OFFICERS ANI STD ANDERSON, HELENS 2963 CLAIRBORO ROAD JACKSONVILLE, FL 00000 PD ANDERSON, RAYMOND L.	ent and litle P applicable. (ID DIRECTORS	Atutes, the above-named co as authorized by the corpor Florida Statutes. NOTE Registered Agent signature req 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	ulred when reinstaling)	
GNATURE LE ME REET ADDRESS Y-ST-ZIP LE REET ADDRESS Y-ST-ZIP LE	Signature, typed or printed name of registered age OFFICERS AN STD ANDERSON, HELENS 2963 CLAIRBORO ROAD JACKSONVILLE, FL 00000 PD ANDERSON, RAYMOND L. 2963 CLAIRBORO ROAD JACKSONVILLE, FL 00000 V	eni and litte # applicable. (ID DIRECTORS	Atutes, the above-named co as authorized by the corpor Florida Statutes. NOTE Registered Agent signature reg 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	ulred when reinstaling)	PL Approve of changing its registered appointment as registered DATE CERS AND DIRECTORS IN 12 Change Additio
GNATURE LE ME REET ADDRESS Y-ST-ZIP LE REET ADDRESS Y-ST-ZIP LE ME	Signature, typed or printed name of registered age OFFICERS AN STD ANDERSON, HELENS 2963 CLAIRBORO ROAD JACKSONVILLE, FL 00000 PD ANDERSON, RAYMOND L. 2963 CLAIRBORO ROAD JACKSONVILLE, FL 00000 V ANDERSON, MICHAEL R.	ent and litle P applicable. (ID DIRECTORS	Atutes, the above-named co as authorized by the corpor Florida Statutes. NOTE Registered Agent signature reg 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	ulred when reinstaling)	
GNATURE LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS REET ADDRESS	Signature, typed or printed name of registered age OFFICERS ANI STD ANDERSON, HELENS 2963 CLAIRBORO ROAD JACKSONVILLE, FL 00000 PD ANDERSON, RAYMOND L. 2963 CLAIRBORO ROAD JACKSONVILLE, FL 00000 V ANDERSON, MICHAEL R. 2963 CLAIRBORO RD.	ent and litle P applicable. (ID DIRECTORS	Atutes, the above-named co as authorized by the corpor Florida Statutes. NOTE Registered Agent signature reg 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	ulred when reinstaling)	
GNATURE LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP	Signature, typed or printed name of registered age OFFICERS AN STD ANDERSON, HELENS 2963 CLAIRBORO ROAD JACKSONVILLE, FL 00000 PD ANDERSON, RAYMOND L. 2963 CLAIRBORO ROAD JACKSONVILLE, FL 00000 V ANDERSON, MICHAEL R.	ent and hite P applicable.	Atutes, the above-named co as authorized by the corpor Florida Statutes. NOTE Registered Agent signature reg 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	ulred when reinstaling)	
GNATURE LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE	Signature, typed or printed name of registered age OFFICERS ANI STD ANDERSON, HELENS 2963 CLAIRBORO ROAD JACKSONVILLE, FL 00000 PD ANDERSON, RAYMOND L. 2963 CLAIRBORO ROAD JACKSONVILLE, FL 00000 V ANDERSON, MICHAEL R. 2963 CLAIRBORO RD.	ent and litle P applicable. (ID DIRECTORS	Atutes, the above-named co as authorized by the corpor Florida Statutes. NOTE Registered Agent signature reg 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	ulred when reinstaling)	
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	Signature, typed or printed name of registered age OFFICERS ANI STD ANDERSON, HELENS 2963 CLAIRBORO ROAD JACKSONVILLE, FL 00000 PD ANDERSON, RAYMOND L. 2963 CLAIRBORO ROAD JACKSONVILLE, FL 00000 V ANDERSON, MICHAEL R. 2963 CLAIRBORO RD.	ent and hite P applicable.	Atutes, the above-named co as authorized by the corpor Florida Statutes. NOTE Registered Agent signature reg 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	ulred when reinstaling)	
GNATURE LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS	Signature, typed or printed name of registered age OFFICERS ANI STD ANDERSON, HELENS 2963 CLAIRBORO ROAD JACKSONVILLE, FL 00000 PD ANDERSON, RAYMOND L. 2963 CLAIRBORO ROAD JACKSONVILLE, FL 00000 V ANDERSON, MICHAEL R. 2963 CLAIRBORO RD.	ent and hite P applicable.	Atutes, the above-named co as authorized by the corpor Florida Statutes. NOTE Registered Agent signature req 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 4.1 TITLE 4.2 NAME	ulred when reinstaling)	
GNATURE LE ME REET ADDRESS (Y-ST-ZIP LE ME REET ADDRESS (Y-ST-ZIP LE ME REET ADDRESS (Y-ST-ZIP LE ME REET ADDRESS (Y-ST-ZIP	Signature, typed or printed name of registered age OFFICERS ANI STD ANDERSON, HELENS 2963 CLAIRBORO ROAD JACKSONVILLE, FL 00000 PD ANDERSON, RAYMOND L. 2963 CLAIRBORO ROAD JACKSONVILLE, FL 00000 V ANDERSON, MICHAEL R. 2963 CLAIRBORO RD.	ent and hite P applicable.	Atutes, the above-named co as authorized by the corpor Florida Statutes. NOTE Registered Agent signature reg 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 4.2 NAME 4.3 STREET ADDRESS	ulred when reinstaling)	
GNATURE LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE ME ME	Signature, typed or printed name of registered age OFFICERS ANI STD ANDERSON, HELENS 2963 CLAIRBORO ROAD JACKSONVILLE, FL 00000 PD ANDERSON, RAYMOND L. 2963 CLAIRBORO ROAD JACKSONVILLE, FL 00000 V ANDERSON, MICHAEL R. 2963 CLAIRBORO RD.	ID DIRECTORS	Atutes, the above-named co as authorized by the corpor Florida Statutes. NOTE Registered Agent signature req 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 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	ulred when reinstaling)	Purpose of changing its registered DATE ICERS AND DIRECTORS IN 12 Change Additio Change Additio Additio Additio Additio
GNATURE CLE CLE CLE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS	Signature, typed or printed name of registered age OFFICERS ANI STD ANDERSON, HELENS 2963 CLAIRBORO ROAD JACKSONVILLE, FL 00000 PD ANDERSON, RAYMOND L. 2963 CLAIRBORO ROAD JACKSONVILLE, FL 00000 V ANDERSON, MICHAEL R. 2963 CLAIRBORO RD.	ID DIRECTORS	Atutes, the above-named co as authorized by the corpor , Florida Statutes. NOTE Registered Agent signature reg 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 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS	ulred when reinstaling)	Purpose of changing its registered DATE ICERS AND DIRECTORS IN 12 Change Additio Change Additio Additio Additio Additio
IGNATURE 2. TLE 2. TLE TLE TREET ADDRESS TY-ST-ZIP TLE TY-ST-ZIP TTY-ST-ZIP T	Signature, typed or printed name of registered age OFFICERS ANI STD ANDERSON, HELENS 2963 CLAIRBORO ROAD JACKSONVILLE, FL 00000 PD ANDERSON, RAYMOND L. 2963 CLAIRBORO ROAD JACKSONVILLE, FL 00000 V ANDERSON, MICHAEL R. 2963 CLAIRBORO RD.	ent and hite # applicable.	Alutes, the above-named co as authorized by the corpor Florida Statutes. NOTE Registered Agent signature req 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 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	ulred when reinstaling)	
IGNATURE 2. TLE 2. TLE 3. TLE 3. TY-ST-ZIP 3. TY-S	Signature, typed or printed name of registered age OFFICERS ANI STD ANDERSON, HELENS 2963 CLAIRBORO ROAD JACKSONVILLE, FL 00000 PD ANDERSON, RAYMOND L. 2963 CLAIRBORO ROAD JACKSONVILLE, FL 00000 V ANDERSON, MICHAEL R. 2963 CLAIRBORO RD.	ID DIRECTORS	Atutes, the above-named co as authorized by the corpor , Florida Statutes. NOTE Registered Agent signature reg 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 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.3 TITLE	ulred when reinstaling)	Purpose of changing its registered DATE ICERS AND DIRECTORS IN 12 Change Additio Change Additio Additio Additio Additio
IGNATURE 2. TILE 2. TILE 3. TILE 3. TY-ST-ZIP TI	Signature, typed or printed name of registered age OFFICERS ANI STD ANDERSON, HELENS 2963 CLAIRBORO ROAD JACKSONVILLE, FL 00000 PD ANDERSON, RAYMOND L. 2963 CLAIRBORO ROAD JACKSONVILLE, FL 00000 V ANDERSON, MICHAEL R. 2963 CLAIRBORO RD.	ent and hite # applicable.	Atutes, the above-named co as authorized by the corpor , Florida Statutes. NOTE Registered Agent signature reg 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 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME	ulred when reinstaling)	
IGNATURE 2. TLE 2. TLE 3. TLE 3. TY-ST-ZIP 3. TY-S	Signature, typed or printed name of registered age OFFICERS ANI STD ANDERSON, HELENS 2963 CLAIRBORO ROAD JACKSONVILLE, FL 00000 PD ANDERSON, RAYMOND L. 2963 CLAIRBORO ROAD JACKSONVILLE, FL 00000 V ANDERSON, MICHAEL R. 2963 CLAIRBORO RD.	ent and hite # applicable.	Atutes, the above-named co as authorized by the corpor , Florida Statutes. NOTE Registered Agent signature reg 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 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.3 TITLE	ulred when reinstaling)	

ţ