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| DOCUMENT # F40657 (1) | | | | 95 HAY -1 AN 10: 11 | | |
| ROBER | rt s. yates & Associa | ITES, INC. | • | SECRETARY OF STA TALLAHASSEE, FLOR | CRETARY OF STATE LAHASSEE, FLORIDA | |
| | e of Business | Mailing Address | | \dashv | • | |
| 131-D EAST MARION AVE. P. O. BOX 1824 PUNTA GORDA FL 33950 | | P. O. BOX 1824 Punta Gorda Fl. 33950 US | | DO NOT WRITE IN THIS SPACE. | | |
| US 2. Principal P | Page of Business | 2a. Maiing Address | | 3. Date Incorporated or Qualified 07/31/1981 4. FEI Number | 3a. Date of Last Report 01/31/1994 | |
| <u>L</u> | | 26 | | 59-2118539 | Applied For Not Applicable | |
| Suite, Apt. | | Suite, Apt. #, etc. | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required | |
| City & State | | City & State | | Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees | |
| Zip | Country 25 | Zip 29 | Country 30 | This corporation has liability for Florida Statutes Yes Yes | □ No | |
| | 9. Name and Address of Cur | rrent Registered Agent | 81 Name | 10. Name and Address of New R | legistered Agent | |
| | , JAMES E., III | | | ess (P.O. Box Number is Not Acceptab | ole) | |
| | . MARION AVE. GORDA FL 33950 | | 83 | · | , | |
| • | | | 84 City | | 85 Zip Code | |
| or register | to the provisions of Sections 607.05 red agent, or both, in the State of Fi ith, and accept the obligations of S | Horida. Such change was autho | onzed by the corporation's boar | ration submits this statement for the pur rd of directors. I hereby accept the appo | nose of changing its societored offic | |
| or register familiar wi | red agent, or both, in the State of Fi ith, and accept the obligations of St Signature, hypother printed name of registered as | Florida, Such change was autho Section 607.0505, Florida Statut | onzed by the corporation's boar | rd of directors. I hereby accept the appoint of directors. | pose of changing its registered offic pintment as registered agent. I am | |
| or register familiar wi | red agent, or both, in the State of Hi ith, and accept the obligations of. Si Signature, types or printed name of rejectored at OFFICERS / | Florida, Such change was autho Section 607.0505, Florida Statut agent and the if applicatio | prized by the corporation's boar tiles. #AOTE Registered Agest signature required 13. 1 1 TITLE | rd of directors. I hereby accept the appo | pose of changing its registered offic pintment as registered agent. I am | |
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