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S. Name and Address of Current Registered Agent	Jacksonville, FL		City & State		4. FEI Number 59-220075	.o /		
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Description (MOTE Registering Ageneragement requirement requir	8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept							
After May 1, 2006 Fee Will be \$550.00 B. Decker Payable to Florida Department of State . Make Check Payable to Florida Department of State . Thus Fund Contribution Added Defees 10. OFFICERS AND DIRECTORS 11. NAME BROWN, LILA B. BROWN, LILA B. NAME BROWN, LILA B. State . ITTLE VD Decke ITTLE NAME BROWN, LILA B. State . State . STRET ADDRES 4250 LAKESIDE DR #208 Stret ADDRES 1514-2 Nira Street UTV-SI-2P JACKSONVILLE FL 32210 CITV-SI-2P JACKSONVILLE FL 32210 CITV-SI-2P UTV-SI-2P JACKSONVILLE FL 32210 CITV-SI-2P JACKSONVILLE FL 32210 CITV-SI-2P UTV-SI-2P JACKSONVILLE FL 32210 CITV-SI-2P JACKSONVILLE FL 32207 CITV-SI-2P ITHE ASVD Decke TTLE STRET ADDRES 1514-2 Nira Street STRET ADDRES JACKSONVILLE FL 32210 CITV-SI-2P JACKSONVILLE FL 32207 CITV-SI-2P ITHE AV Decke TTLE STRET ADDRES 1514-2 Nira Street STRET ADDRES JACKSONVILLE FL 32210 CITV-SI-2P <								
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