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Principal Plac	e of Business	N	alling Address						
195 NORTH VILLAGE AVENUE ROCKVILLE CENTRE NY 11570			195 NORTH VILLAGE AVENUE			3. Date Incorporated	or Qualified		
ROCKVILLE CE	NTRE NY 11570	R	DCKVILLE CENTRE NY 11	570		08/12/1993 4. FEI Number			Applied For
				<u> </u>		NOT APPLI	CABLE		Not Applicat
	edar Av	enue, 26	Mailing Address	rHven	ue	5. Certificate of Status	Desired		Additional Required
Sulte, Apt.		27	Suite, Apt. #, etc.			6. Election Campaign Trust Fund Contribu	-		May Be
City & State	lett NY	28	City & State Hewlett	LNY		7. Is this nonprofit cor		omeowners associat	tion?
zip J/J	57 Count	ilry A	Zip 1/567	Country 30	2	8. This corporation ow	,		
	9. Name and Addi	ress of Current Regis	and the second se	30 4.511		Personal Property T 10. Name and Addres			1200
	ERALDINE			81 Name	_				
6467 EA	STPOINTE PINES S				t Address	s (P.O. Box Number is N	Not Accepta	ble)	
Palm Bi	EACH GARDENS FL	L 33418		83					
				84 City					p Code
11. Pursuant I office or r	to the provisions of Se egistered agent, or bo	ctions 617.0502 and 6 wh, in the State of Flori	317.1508, Florida Statute da. Such change was a Section 617 0503 Flo		d corpora	ation submits this staten 's board of directors. I	nent for the j hereby acce		•
SIGNATURE			317.1508, Florida Statute da. Such change was a d, Section 617.0503, Flo	es, the above-named uthorized by the con rida Statutes.			nent for the j hereby acce	purpose of changing pt the appointment a	•
SIGNATURE	Signature, typed or printed nar	octions 617.0502 and 6 oth, in the State of Flori ccept the obligations o me of registered agent and tille OFFICERS AND DIRE	e il applicable. (NOTE CTORS		re required w			DATE) its registered as registered DRS IN 12
SIGNATURE _	Signature, typed or printed nar	me of registered agent and till	e II applicable. {NOTE	es, the above-name uthorized by the con- rida Statutes. Registered Agent signatur 13. 1.1 TITLE	re required w	vhen reinstating) ADDITIONS/CHANGI		purpose of changing pt the appointment a) its registere as registered DRS IN 12
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