FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAY -1 AM 8:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

DOCUMENT # F94000001516 (3)

1. Corporation Name

FLORIDA DELAWARE CORPORATION

Principal Place of Business	Mailing Address
330 ISLAND ROAD PALM BEACH FL 33480	330 ISLAND ROAD PALM BEACH FL 33480

3. Date Incorporated or Qualified: 03/25/1994
3a. Date of Last Report:

4. FEI Number: 51-0299349 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired [X] — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State	28 City & State
24 Zip / 25 Country	29 Zip / 30 Country

9. Name and Address of Current Registered Agent

HUFTY, PAGE
330 ISLAND ROAD
PALM BEACH FL 33480

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE ______ DATE ______

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	HUFTY, PAGE
STREET ADDRESS	330 ISLAND ROAD
CITY-ST-ZIP	PALM BEACH FL
TITLE	STDV
NAME	HUFTY, FRANCES A
STREET ADDRESS	330 ISLAND ROAD
CITY-ST-ZIP	PALM BEACH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☐ Change ☐ Addition
2.1 TITLE		☐ Change ☐ Addition
3.1 TITLE	ASAT	☐ Change [X] Addition
3.2 NAME	Hufty, Page Lee	
3.3 STREET ADDRESS	340 Island Road	
3.4 CITY-ST-ZIP	Palm Beach, Florida 33480	
4.1 TITLE	ASAT	☐ Change [X] Addition
4.2 NAME	Hufty, Mary Page, M.D.	
4.3 STREET ADDRESS	257 Mapache Drive	
4.4 CITY-ST-ZIP	Portola Valley, California 94028	
5.1 TITLE	ASAT	☐ Change [X] Addition
5.2 NAME	Leidy, Frances Hufty	
5.3 STREET ADDRESS	105/133, 700 W. Downingtown Pike	
5.4 CITY-ST-ZIP	West Chester, Pennsylvania 19380	
6.1 TITLE	ASAT	☐ Change [X] Addition
6.2 NAME	Hufty, John Archbold	
6.3 STREET ADDRESS	10310 S.W. State Road 45	
6.4 CITY-ST-ZIP	Archer, Florida 32618	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Page Hufty, President — April 5, 1995 — (407)655-6760

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0278373 CP