| ANNU | Profit Pòration Jal Report 1996 | | | Sandra B. I Secretary | | | | | | • |
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| ART H | KEELE, INC. | | | | | | | | | |
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| γ.ο. | | 7 | | . Box | 1827 | | 4. FEI Number 58-1500886 | | h | Applied For Not Applicable |
| Suite, Apt. # | | | Suite, Apt. # | , etc. | | | 5. Certificate of Status Desired | | , | Additional Required |
| City & State りいいを Zip | | | City & State 28 0 0 ~ ~ 9 | ٠٥,٨ | Country | | Election Campaign Financin Trust Fund Contribution | | Adde | May Be d to Fees |
| 346 | ر ۲۸ عر | · | 29 346 | <u>97 3</u> | -n : 4 | 3 | 8. This corporation has liability Florida Statutes 10. Name and Address of Ne | Yes No | | 199.032, |
| ALLEN | I, GLENN K | | - <u></u> | | 81 Nar | ne | IV. Name and Address of the | or mogratored | - Agoin | |
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| 353 E. | FORSYTH ST. | | | | | et Addre | ss (P.O. Box Number is Not Acce | eptab e) | | |
| 353 E. | | 2 | | | 82 Stre | et Addre | ess (P.O. Box Number is Not Acce | ptabe) | | |
| 353 E. JACKS | FORSYTH ST. SONVILLE FL 3220 o the provisions of Seed agent, or both, in t | ctions 607,0502 an | d £07.1508, Florid Such change was 607.0505. Florida | a Statutes, t authorized b Statutes | 83 84 City | | iss (P.O. Box Number is Not Acce | FI | - ' | o Code egistered offic agent. I am |
| 353 E. JACKS - Pursuant to or registere familiar with | FORSYTH ST. SONVILLE FL 3220 o the provisions of Se ed agent, or both, in th, and accept the obility, and accept the obility of the second sec | ctions 607,0502 an ne State of Florida, gations of, Section | 607.0505, Florida | Statutes. | 83 84 City | corpora 's board | ation submits this statement for the of of directors. I hereby accept the | FL e purpose of ch appointment a | nanging its r | egistered offic agent. I am |
| 353 E. JACKS Pursuant to or registere familiar with GNATURE | FORSYTH ST. SONVILLE FL 3220 o the provisions of Se ed agent, or both, in th, and accept the obi | ctions 607,0502 anne State of Florida, gations of, Section | 607.0505, Florida | Statutes. (NOTE: F | 83 84 City the above-named by the corporation ag stered Agent signar 13. 1.1 TILE | corpora o's board | stion submits this statement for the of directors. I hereby accept the when reinstating? ADDITIONS/CHANGES TO | purpose of chappointment a | nanging its registered D DIRECTO | egistered offic agent. I am RS IN 12 |
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HINTED NAME OF SIGNING OFFICER ON DIRECTOR 3-11-96 813 733 929 SIGNATURE: