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27     E. Certification of Status Centre of Centre of Status Centre of Cent	27     E. Certificato Visual Desired     Free Required       City 6 Etoice     21     Churchy     21       74     Churchy     21     Stoce     Stoce Control     Name and Address of Now Registered Agent       FOLEY, StEPHEN T     Stoce Control     Stoce Contro     Stoce Control     Stoce Control <td>Suite Area # -</td> <td>51</td> <td></td> <td>uite Ant # etc</td> <td></td> <td></td> <td>04-3157331</td> <td>CO 75</td> <td></td>	Suite Area # -	51		uite Ant # etc			04-3157331	CO 75	
City & Salor       City & Salor       State       Flection Campuign Financing       \$5.00 May Be         Zip       Zip       Country       A. This corporation has labely tor intergible its under a. 198.02P.         Zip       Zip       Country       B. The corporation has labely tor intergible its under a. 198.02P.         Ponda Statutes       Image and Address of Current Registered Agent       Tot. Kame and Address of New Registered Agent       No         FOLEY, STEPHEN T       Street Address (P.O. Box Number is Not Acceptable)       Bit Maria       Bit Maria         ORLANDO FL 32608       Bit Maria       Bit Maria       Bit Maria       Bit Maria         Bit Maria       Direct Address (P.O. Box Number is Not Acceptable)       Bit Maria       Bit Maria         Bit Maria       Direct Address (P.O. Box Number is Not Acceptable)       Bit Maria       Bit Maria         Bit Maria       Direct Address (P.O. Box Number is Not Acceptable)       Bit Maria       Bit Maria         Bit Maria       Direct Maria       Mit Address (P.O. Box Number is Not Acceptable)       Bit Maria         Bit Maria       Direct Maria       Bit Maria       Action Proceed Address (P.O. Box Number is Not Acceptable)       Bit Maria         Bit Maria       Direct Maria       Bit Maria       Action Proceed Address (P.O. Box Number is Not Acceptable)       Bit Maria	City A State       City A State       P       City A State       P       Faceton Campaign Financing       \$5.00 May Be         74       Country       Zp       Country       A The corporation has isolatly for insurphies unders is 90.02         74       Country       Zp       Country       B. The corporation has isolatly for insurphies unders is 90.02         75       Country       Zp       State and Address of New Registered Agent       10. Name and Address of New Registered Agent         FOLEY, STEPHEN T       State Address of New Registered Agent       31       Name       State Address of New Registered Agent         FOLEY, STEPHEN T       State Address of New Registered Agent       31       Name       32         FOLEY, STEPHEN T       State Address of New Registered Agent       32       Code         FOLEY, STEPHEN T       State Address of New Registered Agent       32       Code         FOLEY, STEPHEN T       State Address of New Registered Agent       32       Code         State Address of New Registered Agent       State Address of New Registered Agent       Code         Code registered Agent on the State of Fordal.       State Address of New Registered Agent as tegester       Code         Code registered Agent on the State of Fordal.       State Address of Orecodes Integester       Code         Code register	ວດແຍ. ກຸຊາ:. <b>#</b> . 0	ања.	n	ulle, Apt. #, etc.		5	. Certificate of Status Desired		
Zep       Country       Zip       Country       A The copyration has lability for imanyble (as under s. 199.032, provide) Statutes       Iwa       No         0. Name and Address of Current Registered Agent       Imany Country       A The copyration has lability for imanyble (as under s. 199.032, provide) Statutes       Iwa       No         502 Multi CIRCLE       Imany Country       Imany Country       Imany Country       Imany Country       Imany Country       Imany Country       No         502 Multi CIRCLE       Imany Country       Imany Cou	Zep       Zourty       Zp       Zp       Courty       8. This courtion has liability for interception is courted and interception is liability for interceptin interception intereption is liability for	City & State	······································	C C	ity & State	······································	6	· • •		
	E. Name and Address of Current Registered Agent     Folder, StEPHEN T     Soze MAUL CRCLE     ORLANDO FL 32808     B     City     FL	Ζιρ	1	Z	· •	— , · ·	8	. This corporation has liability for	intangible tax under	
POLET, SIEPHEN / S028 MAUL CRRCLE ORLANDO FL 32808       87         87       Stroct Address (P.O. Box Number is Not Acceptable)         88       84         64       City       FL         65       85         88       84         64       City       FL         64       City       FL         65       State of Fields. State o	POLET, SIEPHENT         S028 MAUL CRCLE         ORLANDO FL 32808         84         City         FL         85         84         City         84         City         85         84         City         84         City         85         84         City         85         86         86         86         87         88         88         89         89         89         80         80         80         80         80         80         80         80         80         80         80         80         80         80         80         80         80         80         80         81         81         81         81         81         81			rrent Register	red Agent		10	). Name and Address of New Re	gistered Agent	
ORLANDO FL 32808       83         44       City       FL       65       Zin Code         45       City       FL       65       Zin Code         46       City       FL       65       Zin Code         47       Creation to the provisions of Socions 607 0502 and 607 1508. Florida Statutes, the above hamed corporation submits this statement for the purpose of changing fits registered agent 1 call indications of Socions 607 05056. Florida Statutes.         CRAALUME       Interview under purpose of Socions 607 0502 and 607 1508. Florida Statutes.       Interview under purpose of changing fits registered agent fail interview accept the appointment as registered agent fail interview under provide agent fail interview accept the appointment as registered agent fail interview accept the appointment as registered agent fail interview under provide agent fail interview accept the appointment as registered agent fail interview accept the appointerview accept the appointment agent agent	ORLANDO FL 32808       83         64       City       FL         65       64       City       FL         66       City       FL       65       Zip Code         67       City       FL       65       Zip Code         68       City       FL       65       Zip Code         68       City       FL       65       Zip Code         69       City       FL       65       Zip Code       FL         60       City       FL       65       Sip Code       FL       <								·	
Image: state in the provisions of Sectors 607 0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and accept the colligations of Sectors 607 0502 and 607.1508. Florida Statutes, the above-named corporations bade of directors. Understated as registered agent that shighted accept the colligations of Sectors 607 0502 and 607.1508. Florida Statutes, the above-named corporations bade of directors. In the state of the appointment as registered agent that shighted accept the colligations of Sectors 607.0503. Florida Statutes, the above-named corporations bade of directors. In the state of the appointment as registered agent under any intervent of the appointment as registered agent and the colligations of Sectors 607.0503. Florida Statutes, the above-named corporations bade of directors. In the state of the appointment as registered agent and the colligations of Sectors 607.0503. Florida Statutes, the appointment as registered agent and the colligations of Sectors 607.0503. Florida Statutes, the appointment as registered agent and the colligations of Sectors 607.0503. Florida Statutes, the appointment as registered agent and the colligations of Sectors 607.0503. Florida Statutes, the appointment as registered agent and the colligations of Sectors 607.0503. Florida Statutes, the appointment as registered agent for the appointment as registered agent for the appointment as registered agent for the appoint of the appointment as registered agent for the appointment as registered agent for the appointment agent ag	B3       B4       City       FL (1)       B5       Zip Code         - Furshame to the provisions of Sociens 607 0502 and 607.1508. Florids Statutes, the above named corporation subard of directors. Hereby acced the appointment as register agent. Further with and accept the obligations of Section 607.0502, Florids Statutes, the above named corporation's board of directors. Hereby accept the appointment as register agent. Further with, and accept the obligations of Section 607.0502, Florids Statutes, the above named corporation's board of directors. Hereby accept the appointment as register agent. Further with and accept the obligations of Section 607.0502, Florids Statutes, the above named corporation's board of directors. Hereby accept the appointment as register agent. Further section for the purpose of change is the statement of the obligations of Section 607.0502, Florids Statutes, the statement for the purpose of change is the statement of the obligation of Section 607.0502, Florids Statutes, the statement of the obligation of Section 607.0502, Florids Statutes, the statement of the obligation of Section 607.0502, Florids Statement of the obligation of Section 607.0502, Florids Statement of the statement of the purpose of change is the statement of the statement of the statement of the obligation of Section 607.0502, Florids Statement of the statement of the statement of the statement of the statement					82 Street	Address I	(P.O. Box Number is Not Acceptat	ole)	
Trustaum to the provisions of Sections 607 0002 and 607 1508. Florida Statutes. the above-maned corporation's board of directors. I hereby accept the appointment as registered agent or table, and accept the obligations of Section 607 0505, Florida Statutes.      Section 2015 Sections 607 0502 and 607 1508. Florida Statutes.      Section 2015 Sections 607 0505, Florida Statutes.      Section 2015 Sections 2015 S	Transmit to the provisions of Socions 607 0500° and 607 1508. Honda Statutes, the above named corporation's board of directors. Thereby accept the appointment as registered agent or tools, in the State of Forda. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent or tools, in the State of Forda. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent or tools, in the State of Forda. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent of the appointment as registered agent or tools and or tog interdement. Such as the forder of the change					83				
I. Conserve to the provide of the conserve of	I. Pursue to investore of Sectors 607 0502 and 607 1508. Florida Statutes, the above named corporation submits the statement for the purpose of charging as authorized by the coporation's board of directors. Thereby accept the appointment as registere agent 1 and family and accept the obligations of, Sector 607,0505, Florida Statutes.  GRAATURE					84 City	<u> </u>		EI 85 Zip	Code
ME       FOLEY, STEPHEN T       12 NAME       Foley, Stephen T.         BIT ADDRESS       5029 MAUI CIR.       5029 Maui Circle         ORLANDO FL 32808       14 CITY-ST-2P       Orlando, FL 32808         Mit       DELFTE       21 Mit ADDRESS       Orlando, FL 32808         Mit ADDRESS       DELFTE       21 Mit Mit Marilynn         23 STRET ADDRESS       21 Mystic Street         24 CITY-ST-2P       Brockton, MA. 02402         Mit ADDRESS       24 CITY-ST-2P       Brockton, MA. 02402         Mit ADDRESS       33 STRET ADDRESS       44 Delmar Road         Mit ADDRESS       34 CITY-ST-2P       Brockton, MA 02402         Mit ADDRESS       34 CITY-ST-2P       Brockton, MA 02402         Mit ADDRESS       34 CITY-ST-2P       Brockton, MA 02402         Mit ADDRESS       44 Delmar Road       34 CITY-ST-2P         Mit ADDRESS       44 CITY-ST-2P       Change Address         Mit ADDRESS       43 STRET ADDRESS       44 OITY-ST-2P         Mit ADDRESS       53 STRET ADDRESS       53 STRET ADDRESS	M4E       FOLEY, STEPHEN T         INEEL AGRESS       5029 MAUL CIR.         ORLANDO FL 32808       13 STREET ADDRESS         OPLIANDO FL 32808       OPLIFIE         IT       11 TILE         ART       DELETE         21 MARE       OPLIANDO FL 32808         IT       STREET ADDRESS         22 MARE       OPLIANDO FL 32808         IT       Explore         MI       DELETE         21 MILE       Trepsbürer/Dirèctor         Change KL Addit       Change KL Addit         PROCKTON, MA       02402         IT       OPLETE         31 TILE       Trepsbürer/Dirèctor         Change KL Addit       Change KL Addit         POLETE       31 TILE         STRET ADDRESS       24 OUT-ST-2P         Brockton, MA       02402         IT       33 STRET ADDRESS         44 Delmar Road       34 OUT-ST-2P         IT       Brockton, MA       02402         IT       IT       Change L Addit         IV ST-2P       44 OPL MARE       DELETE         IT       STREET ADDRESS       STREET ADDRESS         IV ST-2P       STREET ADDRESS       STREET ADDRESS	IGNATURE	narice type disc pointed name of registance	d agert and title if a	opicable. (NOTE	: Registered Agent signature	required wh			
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4. I do hereby certify that the information supplied with this filing 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 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 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 officer or director of the corporation or an attachment with an address.	4. I do hereby certify that the information supplied with this filing 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; 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 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 and the same legal effect as in an enable of the corporation	IY-SI         ZP         Q           IXF			DELETE	1 2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP 6.1 TITLE 6.2 NAME	Fole 5029 Orla Trea Rum 21 1 Brod Clea Fole 44 1	ey, Stephen T. 9 Maui Circle ando, FL 32808 asúrer/Dirèctor plik, Marilynn Mystic Street ckton, MA 02402 rk/Director ey, Stephen P. Delmar Road	Change	Additio
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	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	IY-SI-Z/P         Q           ILF         ME           ME         FEET ADDRESS           IY-SI-Z/P         ILF           ME         FEET ADDRESS           IV-SI-Z/P         ILF           ME         FEET ADDRESS			DELETE	1 2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS	Fole 5029 Orla Trea Rum 21 1 Brod Clea Fole 44 1	ey, Stephen T. 9 Maui Circle ando, FL 32808 asúrer/Dirèctor plik, Marilynn Mystic Street ckton, MA 02402 rk/Director ey, Stephen P. Delmar Road	Change	Additio
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