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2730 BLUE HERON V.G. DELAND FL 32720 83 84 City FL 85 Zip 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 representation with, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its representation with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signamus, typed or printed name of registered agent and stite if applicative. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11. TitllE PSD DELAND FL 1.1 TitllE 1.2 NAME LOPES, SHARON BENLINE 1.3 SIREET ADDRESS 2.730 BLUE HERON V.G. 1.3 SIREET ADDRESS 2.730 BLUE HERON V.G. 1.3 SIREET ADDRESS 2.748 BLUE HERON V.G. 2.3 SIREET ADDRESS 2.748 BLUE HERON V.G. 2.3 SIREET ADDRESS 2.748 BLUE HERON V.G. 2.3 SIREET ADDRESS 2.748 BLUE HERON V.G. 3.1 TITLE Change	
DELAND FL 32720 83 84 City FL 85 Zip 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 representation 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, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature to the purpose of changing its representation of the purpose of changing its represen	
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 refamiliar with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE Signature: typed or printed halte of registered agent and title if applicable. INOTE: Registered Agent signature required when reinslating) DATE	
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 reformal familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE Signature. Speak or provided name of registered agent and title inspirable. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS ITIEE PSD DELAND FL LOPES, SHARON BENLINE STREET ADDRESS CITY-ST-ZIP DELAND FL 14. CITY-ST-ZIP DELAND FL 14. CITY-ST-ZIP DELAND FL OFFICERS AND DIRECTORS 2748 BLUE HERON VLG. DELAND FL OFFICERS AND DIRECTORS 23. STREET ADDRESS CITY-ST-ZIP DELAND FL OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 14. CITY-ST-ZIP TITLE VD DELAND FL Change	Code
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NAME BRINKOETTER, TAMARA B. STREET ADDRESS CHY-ST-ZIP DELAND FL TITLE VD DELETE 3.1 TITLE NAME GUEDRY, MARI BETH STREET ADDRESS 24 CITY-ST-ZIP DELETE 3.2 NAME CHARGE STREET ADDRESS 24 CITY-ST-ZIP Change	[] Addition
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TITLE VD DELETE 3.1 TITLE NAME GUEDRY, MARI BETH SUBSELADDRESS 811 W CHILDON ST	
MAME GUEDRY, MARI BETH STORE LADDRESS 811 W. CALLIDOLL ST.	Addition
STREET ADDRESS 811 W. CHURCH ST.	
CITY CL 200 DCI AND CI	
TITLE VD DELETE 4.1 TITLE TO Change	☐ Addition
NAME PUPA, ROBERTA C. 4.2 NAME	_
STREET ADDRESS 60 GARAVOGUE ST. 4.3 STREET ADDRESS CITY-ST-ZIP 0RLAND PARK IL 4.4 CITY-ST-ZIP	
TITLE VD DELETE 5 1 TITLE Change	Addition
NAME GREEN, LORI KAYE STREFT ADDRESS 8420 DAWN HILL DR.S.E. 5.2 NAME 5.3 STREET ADDRESS	
CITY-SI-ZIP OLYMPIA WA 5.3 STREET ADDRESS 5.4 CITY-SI-ZIP	
TAILE DELETE 6.1 TITLE Change	Addition
NAME 62 NAME STREET ADDRESS	
CITY-S1-2IP 64 CITY-S1-7IP	
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)(k), Florida Statutes 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 my appears in Block 12 or Block 13 it changed or on an attachment with an address.	