ANNUAL	PETT PRATION PREPORT		DIVIS	A DEPARTMENT Sandra B. Mor Secretary of S SION OF CORP	rtham State			
OCUME orporation Nar SANDPII	ENT # PER HILL (H1567	9	(4)			1918 1914 BIBNI BIBNI 1	11 <u>11 8111 8111 8111 8111 81</u>
cipal Place of E 5929 POWERS JACKSONVILLE	AVENUE			ERS AVENUE ILLE FL 32217		3. Date incorporated or Qualified 08/08/1984		
Principal Place	of Business		2a. Mailing Add	Iress		4. FEI Number 59-2431179		Applied For Not Applicable
Suite, Apt. #, e			Suite, Apt.	#, etc.		5. Certificate of Status Desired	\$	8.75 Additional Fee Required
			27] City & State			6. Election Campaign Financing		\$5.00 May Be
Crty & State	····	Country	28 Zip		Country	Trust Fund Contribution 8. This corporation has liability for	r intangible tax и	Added to Fees index s 199.032,
Ζιρ 	25		29	30		Florida Statutes Ye 10. Name and Address of New	es 🔲 No	
	9. Name and	Address of Current	negistered Agen		81 Name			
	PEGGY C. WERS AVE.				82 Street Addr	ress (P.O. Box Number is Not Accept	able) 	
DUZU PU)WERS AVE.)NVILLE FL 3:	2217			83			
JACKSU	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				l l			
, Pursuant to	the provisions o	of Sections 607.0502	and 607.1508, Flor Li Such change wo on 607.0505, Floric	rida Statutes, th as authorized b da Statutes.	84 City se above-named corporation's boa	ration submits this statement for the part of directors. I hereby accept the a	F	85 Zip Code ging its registered off gistered agent. I am
, Pursuant to or registered familiar with, GNATURE S.	the provisions of agent, or both, and accept the grant paid or pro- PD GOYKE, I 5929 PO	of Sections 607.0502, in the State of Flor de obligations of, Section of Florens and OFFICERS AND PEGGY C. WERS AVE.	aid recitaget abe		ne above-named corporation's boards agents of Agent Signa are required. 13. 1 1 T.T.E. 12 NAME. 13 STREET ADDRESS.		purpose of chang ppointment as re care	ging its registered off igistered agent. I am
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