## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # H37800

SIGNATURE: Randall P. Will

(0)

ENVIRO AIR. INC.

Application of Business TAMPA FL 38814  250 WEST HAWATHA ST TAMPA FL 38814  250 WEST HAWATHA ST TAMPA FL 38814  250 WEST HAWATHA ST TAMPA FL 38814  26	EMAI	no air, inc.									
TAMPA FL 39814  TAMPA FL 39814  3. Didle Principconhol of Challetted   3a. Didne of Light Percent   0.1/14/1985   0.3/16/1985	Principal Place	of Business	Mailing Address				{	ERIE OOM TABA	ALBIT BYBIT BI		ļ!
2. Philosopia Place of Business 1. 7519 Twelve Oaks Blvd 2s 7519 Twelve Oaks Blvd 3s 5000, Act, 4 std. 2. Sullo, Act, 4 std. 2. Sull		•									
Total Twelve Oaks Blvd   Set   Total Twelve Oaks Blvd   Set   Se								3a. Oate			
Sulfa, Apr. #, etc.    27   Sulfa, Apr. #, etc.   27   27   27   27   27   27   27   2					) - le	c Plyd			-	<del></del>	
School Campaign File			ļ <del> </del>	ve c	Jak	S DIVU	59-2495083				<del>)</del>
City   State   State   Tampa   FL   State   Tampa   State		#, etc.					1 <b>5.</b> Certificate of Status Desired 1 1				
3 Tampa , FL											
33634   Country   Signer   S	·		28 Tampa, FL								
### STATE LANGESS OF SET AND ALL P.    Part	Zip	Country	gh <sup>Zip</sup> 33634	Cou Hi	i 11	sborou	This corporation has liability for Florida Statutes	intangible ta	x under s	199.032,	
WHILHELM, RANDALL P. 7519 TEWLYE OAKS BLVD TAMPA FL 33614  82 Street Address (P.O. Box Number is Not Acceptable)  83 B4 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 or changing its registered defice 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, 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, 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, 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, or both of directors. I hereby accept the oppointment as registered agent, or both of directors. I hereby accept the appointment as registered affice or registered agent, or both, in the State of Florida. Such change is a state of florida.		9. Name and Address of Current F	<del></del>				10. Name and Address of New F	Registered	Agent		
7519 TEWLYE OAKS BLVD TAMPA FL  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 agent, or both, in the State of Florida. Such change was sufficiently the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the objection of Scotion 607.0502, Florida Statutes.  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS in 12. INIT.  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS in 12. INIT.  14. INIT. STATES ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS in 12. INIT.  15. STATES ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS in 12. INIT.  16. TAMPA FL  17. STAMPA FL  18. STATES ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS in 12. INIT.  18. STATES ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS in 12. INIT.  18. STATES ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS in 12. INIT.  18. STATES ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS in 12. INIT.  19. TAMPA FL  19. STATES ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS in 12. INIT.  19. TAMPA FL  19. STATES ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS in 12. INIT.  19. STATES ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS in 12. INIT.  19. STATES ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS in 12. INIT.  19. STATES ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS in 12. INIT.  19. STATES ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS in 12. INIT.  19. STATES ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS in 12. INIT.  19. STATES ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS in 12. INIT.  19. STATES ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS in 12. INIT.  19. STATES ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS in 12. INIT.  19. STATES ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS in 12. INIT.  19. STATES ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. INIT.  19. STATES ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. INIT.  19. STATES ADDITIONS/CHANGES TO OF					81	Name					
TAMPA FL 33614    B3	WHILE	HELIM, RANDALL P.		١	82	Street Addres	ss (P.O. Box Number is Not Acceptat	ole)			
### City ###   ###											
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 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 office or pregistered 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 office or pregistered 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 office or pregistered 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 office or pregistered office or pregistered agent, in the propriet of the purpose of change its registered office or pregistered agent, in the purpose of change its registered office or pregistered agent, in the purpose of change its registered office or pregistered agent, in the purpose of change its registered office or pregistered agent, in the purpose of change its registered office or pregistered agent, in the purpose of change its registered office or pregistered agent, in the propriet as registered office or pregistered agent, in the propriet as registered office or pregistered agent, in the purpose of change its registered agent. I am feature and accept the propriet as registered agent, in the propriet as registered agent. I am feature and accept the propriet as registered agent. I am feature and accept the propriet as registered agent. I am feature and accept the propriet as a propriet agent and accept the purpose of pregistered agent. I am feature and accept th	TAMP	A FL 33614			83						
11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Ribrides Statutes. The above hamed corporation exhanits this statement for the purpose of changing its registered office for registered apent, or both, in the State of Rorical Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am Signature, and accept the obligations of, Section 607.0508, Florida Statutes.  SIGNATURE    CFFICERS AND DIRECTORS					84	City		#=1	B5 Zir	Code	
or registered agent, or both, in the State of Floridas. 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 607.0605, Florida Statutes.  SIGNATURE  Signatus, typed or primor name of registered agent and their accidation.  POTE Proportion Agent signature required agent agent and their accidation.  POTE Proportion Agent signature required agent agent and their accidation.  POTE TO THE DIRECTORS IN 12  12. OFFICERS AND DIRECTORS IN 12  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. ADMAE  15. TIRELE  15. TIRELE  16. TIRELE  16. TIRELE  17. TIRELE  17. TIRELE  18. TIRELE  19. TIRE	11 Durauant t	a the provisions of Sections 607 0500 as	ad 607 1509. Elorida Statutas	the she		mad corporati	ion submits the statement for the ou		noging its r	naistared offic	
TITLE POFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PORTOGRAM PRODUCTIONS TO OFFICERS AND DIRECTORS IN 12 TITLE PORTOGRAM PRODUCTIONS TO OFFICERS AND DIRECTORS IN 12 TITLE PORTOGRAM PRODUCTIONS TO OFFICERS AND DIRECTORS IN 12 TITLE PORTOGRAM PRODUCTIONS TO OFFICERS AND DIRECTORS IN 12 TITLE PORTOGRAM PRODUCTIONS TO OFFICERS AND DIRECTORS IN 12 TITLE PORTOGRAM PRODUCTIONS TO OFFICERS AND DIRECTORS IN 12 TITLE PORTOGRAM PRODUCTIONS TO OFFICERS AND DIRECTORS IN 12 TITLE PORTOGRAM PRODUCTIONS TO OFFICERS AND DIRECTORS IN 12 TITLE PORTOGRAM PRODUCTIONS TO OFFICERS AND DIRECTORS IN 12 TITLE PORTOGRAM PRODUCTIONS TO OFFICERS AND DIRECTORS IN 12 TITLE PORTOGRAM PRODUCTIONS TO OFFICERS AND DIRECTORS IN 12 TITLE PORTOGRAM PRODUCTIONS TO OFFICERS AND DIRECTORS IN 12 TITLE PORTOGRAM PRODUCTIONS TO OFFICERS AND DIRECTORS IN 12 TITLE PORTOGRAM PRODUCTIONS TO OFFICERS AND DIRECTORS IN 12 TITLE PORTOGRAM PRODUCTIONS TO OFFICERS AND DIRECTORS IN 12 TITLE PORTOGRAM PRODUCTIONS TO OFFICERS AND DIRECTORS IN 12 TITLE PORTOGRAM PRODUCTIONS TO OFFICERS ADDRESS OFFI TO OF	or registere familiar wit SIGNATURE	ed agent, or both, in the State of Florida. th, and accept the obligations of, Section	Such change was authorized 607.0505, Florida Statutes.	by the d	corpor	ation's board	of directors. I hereby accept the app	ointmert as	registered	agent. I am	
NAME  WILHELMI, RANDALL P.  22 NAME  STREET ADDRESS  7519 TWELVE OAKS BLVD  22 STREET ADDRESS  CITY_ST_ZIP  TITLE  S  DELETE  3 IT LE  STREET ADDRESS  TAMPA FL  10903 BRIGHTSIDE DR  32 NAME  STREET ADDRESS  TAMPA FL  TITLE  TITLE  TITLE  TITLE  TITLE  THE COHANGE  Addition  NAME  WILHELMI, ERIC P  4. TITLE  NAME  WILHELMI, ERIC P  4. TITLE  NAME  WILHELMI, ERIC P  4. TITLE  TITLE  TITLE  DELETE  4. TITLE  DELETE  5. TILE  DELETE  6. TILE  DELETE  6. TILE  DELETE  6. TILE  DELETE  1. TILE  DELETE  1. TILE  DELETE  1. TILE  DELETE  1. TILE  DELETE  5. TILE  DELETE  6. TILE  DELETE  6. TILE  DELETE  1. TILE  DELETE  DELETE  1. TILE  DELETE  DELETE  1. TILE  DELETE  DELET		<del></del>			d Agents	ignature required w			DIRECTO	DS IN 12	⊸ାଛି
NAME  WILHELMI, RANDALL P.  22 NAME  STREET ADDRESS  7519 TWELVE OAKS BLVD  22 STREET ADDRESS  CITY_ST_ZIP  TITLE  S  DELETE  3 IT LE  STREET ADDRESS  TAMPA FL  10903 BRIGHTSIDE DR  32 NAME  STREET ADDRESS  TAMPA FL  TITLE  TITLE  TITLE  TITLE  TITLE  THE COHANGE  Addition  NAME  WILHELMI, ERIC P  4. TITLE  NAME  WILHELMI, ERIC P  4. TITLE  NAME  WILHELMI, ERIC P  4. TITLE  TITLE  TITLE  DELETE  4. TITLE  DELETE  5. TILE  DELETE  6. TILE  DELETE  6. TILE  DELETE  6. TILE  DELETE  1. TILE  DELETE  1. TILE  DELETE  1. TILE  DELETE  1. TILE  DELETE  5. TILE  DELETE  6. TILE  DELETE  6. TILE  DELETE  1. TILE  DELETE  DELETE  1. TILE  DELETE  DELETE  1. TILE  DELETE  DELET	~ <del>~~~~~~~~</del>	<b>B</b>			ILTI F		ADDITIONS/CHANGES TO OFF				– ইু
NAME  WILHELMI, RANDALL P.  22 NAME  STREET ADDRESS  7519 TWELVE OAKS BLVD  22 STREET ADDRESS  CITY_ST_ZIP  TITLE  S  DELETE  3 IT LE  STREET ADDRESS  TAMPA FL  10903 BRIGHTSIDE DR  32 NAME  STREET ADDRESS  TAMPA FL  TITLE  TITLE  TITLE  TITLE  TITLE  THE COHANGE  Addition  NAME  WILHELMI, ERIC P  4. TITLE  NAME  WILHELMI, ERIC P  4. TITLE  NAME  WILHELMI, ERIC P  4. TITLE  TITLE  TITLE  DELETE  4. TITLE  DELETE  5. TILE  DELETE  6. TILE  DELETE  6. TILE  DELETE  6. TILE  DELETE  1. TILE  DELETE  1. TILE  DELETE  1. TILE  DELETE  1. TILE  DELETE  5. TILE  DELETE  6. TILE  DELETE  6. TILE  DELETE  1. TILE  DELETE  DELETE  1. TILE  DELETE  DELETE  1. TILE  DELETE  DELET		WILHELMI, RANDALL P	<b>—</b>					_			4
NAME  WILHELMI, RANDALL P.  22 NAME  STREET ADDRESS  7519 TWELVE OAKS BLVD  22 STREET ADDRESS  CITY_ST_ZIP  TITLE  S  DELETE  3 IT LE  STREET ADDRESS  TAMPA FL  10903 BRIGHTSIDE DR  32 NAME  STREET ADDRESS  TAMPA FL  TITLE  TITLE  TITLE  TITLE  TITLE  THE COHANGE  Addition  NAME  WILHELMI, ERIC P  4. TITLE  NAME  WILHELMI, ERIC P  4. TITLE  NAME  WILHELMI, ERIC P  4. TITLE  TITLE  TITLE  DELETE  4. TITLE  DELETE  5. TILE  DELETE  6. TILE  DELETE  6. TILE  DELETE  6. TILE  DELETE  1. TILE  DELETE  1. TILE  DELETE  1. TILE  DELETE  1. TILE  DELETE  5. TILE  DELETE  6. TILE  DELETE  6. TILE  DELETE  1. TILE  DELETE  DELETE  1. TILE  DELETE  DELETE  1. TILE  DELETE  DELET		=	SELVE ALVA BIND			DDRESS	s				
NAME  WILHELMI, RANDALL P.  22 NAME  STREET ADDRESS  7519 TWELVE OAKS BLVD  22 STREET ADDRESS  CITY_ST_ZIP  TITLE  S  DELETE  3 IT LE  STREET ADDRESS  TAMPA FL  10903 BRIGHTSIDE DR  32 NAME  STREET ADDRESS  TAMPA FL  TITLE  TITLE  TITLE  TITLE  TITLE  THE COHANGE  Addition  NAME  WILHELMI, ERIC P  4. TITLE  NAME  WILHELMI, ERIC P  4. TITLE  NAME  WILHELMI, ERIC P  4. TITLE  TITLE  TITLE  DELETE  4. TITLE  DELETE  5. TILE  DELETE  6. TILE  DELETE  6. TILE  DELETE  6. TILE  DELETE  1. TILE  DELETE  1. TILE  DELETE  1. TILE  DELETE  1. TILE  DELETE  5. TILE  DELETE  6. TILE  DELETE  6. TILE  DELETE  1. TILE  DELETE  DELETE  1. TILE  DELETE  DELETE  1. TILE  DELETE  DELET	-										l 🛱
TREET ADDRESS CITY-ST-ZIP TAMPA FL  23 STREET ADDRESS CITY-ST-ZIP TITLE S DELETE 3 ITLE S DELETE 3 ITLE STREET ADDRESS TO903 BRIGHTSIDE DR 32 AME STREET ADDRESS CITY-ST-ZIP TITLE T DELETE 4 ITLE STREET ADDRESS CITY-ST-ZIP TITLE T DELETE 4 ITLE TAMPA FL TO DELETE 4 ITLE TAMPA FL TAM	TITLE	D	☐ DELETE	_					Change	Addition	「ㅁ
TAMPA FL	NAME			2.2 NAME							
TITLE S DELETE 3 ITLE DELETE 3 DELETE 4 DELETE 5	STREET ADDRESS			2.3 STREET A		DDRESS					
NAME STREET ADDRESS 10903 BRIGHTSIDE DR 32 STREET ADDRESS CITY-ST-ZIP TITLE T DELETE 4. ITLE WILHELMI, ERIC P 4. ITLE STREET ADDRESS CITY-ST-ZIP TITLE TAMPA FL 4. ITLE STREET ADDRESS CITY-ST-ZIP TITLE TAMPA FL 4. ITLE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP STREET ADDRESS C	CITY-ST-ZIP										_
STREET ADDRESS CITY-ST-ZIP TAMPA FL  10903 BRIGHTSIDE DR 13 JIREET ADDRESS CITY-ST-ZIP TITLE T DELETE A. ITLE WILHELMI, ERIC P 42 AME STREET ADDRESS CITY-ST-ZIP TITLE TAMPA FL  43 JIREET ADDRESS CITY-ST-ZIP TITLE DELETE 5 JIREE 1 ADDRESS CITY-ST-ZIP TITLE DELETE 5 JIREET ADDRESS CITY-ST-ZIP TITLE DELETE 5 JIREET ADDRESS CITY-ST-ZIP TITLE DELETE 6 JIREET ADDRESS CITY-ST-ZIP TITLE DELETE TOTALDRESS CITY-ST-ZIP TITLE DELETE DELE	TITLE		☐ DELETE	3. 3	ITLE			į.	) Change	Addition	
TAMPA FL  TITLE  T  DELETE  A  ITLE  TITLE  T  DELETE  A  ITLE  TAMPA  ADME  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  A  TAMPA FL  TITLE  DELETE  A  TAMPA  A  TAMPA  A  TAMPA  A  TAMPA  TITLE  DELETE  TITLE  TITLE  DELETE  TITLE  TITLE  DELETE  TITLE  TO Change  Addition  Addition  THE ADDRESS  TITLE  TO Change  Addition  TO ADDITION	NAME				AME						
TITLE T DELETE 4. ITLE Change Addition  NAME WILHELMI, ERIC P  STREET ADDRESS 411 S ALBANY 4.1 TREET ADDRESS CITY-ST-ZIP TAMPA FL 4.2 TAMPA FL 4.3 TREET ADDRESS CITY-ST-ZIP TITLE DELETE 5. ITLE Change Addition  NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6. ITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6. ITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6. ITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE G.3 TREET ADDRESS CITY-ST-ZIP TITLE G.4 TITY-ST-ZIP 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)R, Fiorida Statutes. I further	STREET ADDRESS			1 5							
NAME WILHELMI, ERIC P 411 S ALBANY 5TREET ADDRESS CITY-ST-ZIP TITLE DELETE DELETE 5.6 IILE STREET ADDRESS CITY-ST-ZIP TITLE DELETE 5.6 IILE STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6.6 IILE STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6.7 IILE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6.8 IREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6.3 IREET ADDRESS CITY-ST-ZIP 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. I further	CITY-ST-ZIP	IAMPA FL	E3 botter	-		ZIP			7 (	T Addison	
STREET ADDRESS CITY-ST-ZIP TAMPA FL  4.5 TREET ADDRESS CITY-ST-ZIP TITLE DELETE 5. TILE STREET ADDRESS CITY-ST-ZIP TITLE DELETE 5.0 TREET ADDRESS CITY-ST-ZIP 5.4 TY-ST-ZIP TITLE DELETE 6.1 TILE NAME STREET ADDRESS CITY-ST-ZIP 6.2 AME STREET ADDRESS CITY-ST-ZIP 6.3 TREET ADDRESS CITY-ST-ZIP 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. I further		MARINE MI EDIC D	☐ DETE ! E					L	change	☐ ¥00@0	
TITLE DELETE 5. TILE Change Addition  NAME  STREET ADDRESS CITY-ST-ZIP  TITLE DELETE 6. TILE NAME  STREET ADDRESS CITY-ST-ZIP  TITLE DELETE 6. TILE NAME  STREET ADDRESS CITY-ST-ZIP  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. I further	i					200000				•	
TITLE DELETE 5. HLE Change Addition  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE DELETE 6. HLE  NAME  STREET ADDRESS  CITY-ST-ZIP  DELETE 6. HLE  Change Addition  Change Addition  Change Addition  Addition  NAME  STREET ADDRESS  CITY-ST-ZIP  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. I further											1
NAME STREET ADDRESS CITY-ST-ZIP S4   TY-ST-ZIP TITLE DELETE 6.1   TLE NAME STREET ADDRESS CITY-ST-ZIP 6.2   AME STREET ADDRESS CITY-ST-ZIP 6.3   TREET ADDRESS CITY-ST-ZIP 6.4   TIY-ST-ZIP  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. I further		IAMEATE	☐ DELETE	-		ZIP			T Change	[ ] Addition	$\dashv$
STREET ADDRESS CITY-ST-ZIP  TITLE DELETE OF ADDRESS CITY-ST-ZIP  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. I further		·	<u> </u>								
CITY-ST-ZIP  TITLE  DELETE  6.1 ITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  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. I further						DORESS					
TITLE DELETE 6 1 ITLE Change Addition  NAME  STREET ADDRESS  CITY-ST-ZIP  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. I further				1 1							
STREET ADDRESS  CITY-ST-ZIP  6.3 TREET ADDRESS  6.4 TTY-ST-ZIP  14. I do hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k'), Florida Statutes. I further	TITLE		☐ DELETE					]	Change	Addition	7
STREET ADDRESS CITY-ST-ZIP  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. I further	NAME			6.2	AME			·			
64 TTY-ST-ZIP  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. I further				6.3	IREET AI	DORESS	•				
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. I further	CITY - ST - ZIP										
	14. I do hereb	y certify that the information supplied wit	h this filing is voluntarily furnish	ed and	does	not qualify for	the exemption stated in Section 119	.07(3)(k), Flo	rida Statut	es. I further	$\neg$

3-11-96 813-935-5454
Date Daytine Prione #