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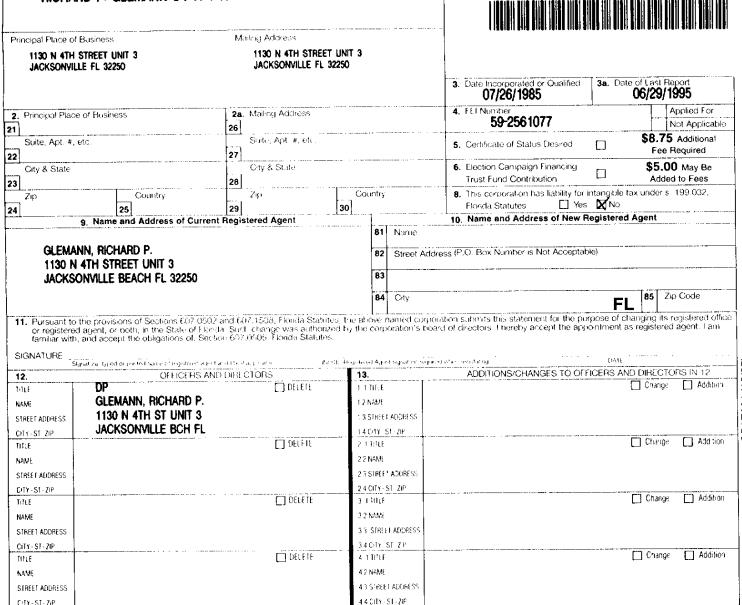
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1. Corporation Name

RICHARD P. GLEMANN C.P.A. P.A.



14. Too hereby certify that the information supplied with this filing is voluntarily furnished and does not quality for the exemption stated in Section 119.07(3)(k). 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 I am an officer or director of the component in or the red are on the same legal effect as if made under certify that I am an officer or director of the component in the red are officers.

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SIGNATURE:

TITLE

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STREET ADDRESS

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CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

[T] DELETE

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RICHARD P. GLEMAN 6/28/96

904-247-6044

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Add-tion

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