FILE NUW, FILING F	FEE AFTER	MAY 1 IS S	\$550.0	3		ILED	
PROFIT		FLORIDA DEPAR	TMENT OF S	STATE	☐ Jan 23 1	<u>997 8:</u>	:00am
CORPORATION ANNUAL REPORT			. Mortham		Secret	ary of	State
1997		DIVISION OF C	y of State ORPORATIO	ONS			State
OCUMENT # J008	55	(3)					
INIFORMS & MORE, INC.							
sipal Place of Business		Address					
MASON AVENUE. SUITE D TONA BEACH FL 32117-2512	ig Address Mason avenue, suite d Ona beach fl 32117-5512			, and and and have read they are not and and a figh arbit about and the source of the			
					 Date Incorporated or Qualifie 02/25/1986 	ed 3a. Date of L 07/02/19	
rincipal Place of Business	<u> </u> 1	iling Address			4, FEI Number		Applied For
uite, Apt. #, etc	26 Sui	to, Apt. #, etc.			59-2655903	\$8.	Not Applicable .75 Additional
·	27		<u> </u>		5. Certificate of Status Desired	F	ee Required
Dity & State	Cit 28	y & State			6. Election Campaign Financing Trust Fund Contribution		5.00 May Be dded to Fees
/ip Country	Z¢		Country	,	8. This corporation has liability	for intangible tax un	
25 9. Name and Address of C	29 Current Registere		30		Florida Statutes 10. Name and Address of New	Yes No Registered Agent	······································
SCHAD, CAROL			81	Name			
190 HIDDEN HILLS DR.			82	Street Add	Iress (P.O. Box Number is Not Accept	otable)	
ORMOND BEACH FL 32174			83				
			84	City		LOC	
P		LOC Deside Destate	84			FL ⁶⁵	Zip Code
Pursuant to the provisions of Sections CO office or registered agent, or both, in the	07.0502 and 607.1 State of Florida, 6 obligators of Se	508, Florida Statute Such change was a	es, the above	e-named cor	poration submits this statement for th tion's board of directors. I hereby ac	PL	and its registered
office or registered agent, or both, in the agent, I am familiar with and accept the NATURE.	State of Florida, £ obligations of, Se	Such change was a ction 607.0505, Flo	es, the above outhorized by prida Statute	e-named cor / the corpora 3.	ition's board of directors. I hereby ac	PL he purpose of chang cept the appointme	and its registered
office or registered agent or both, in the agent i am familiar with and accept the NATURE	State of Florida, £ obligations of, So end agent and the starp	Such change was a ction 607.0505, Flo	es, the abovi outhorized by prida Statute Registered Ag	e-named cor / the corpora 3.	ition's board of directors. I hereby ac	PL e purpose of chang cept the appointme DATE	ging its registered ant as registered
office or registered agent or both, in the agent i am familiar with and accept the NATURE. <u>Stratus Mestical Stratus OFFICE F</u> OFFICE F	State of Florida, £ obligations of, Se	Such change was a ction 607.0505, Flo	es, the above outhorized by prida Statute	e-named cor / the corpora 3.	ition's board of directors. I hereby ac	PL e purpose of chang cept the appointme DATE	ging its registered ant as registered CTORS IN 12
office or registered agent or both, in the agent Lab familiar with and accept the NATURE. Bistance bleet with Schedulist Construction OFFICE F STD SCHAD, GARY	State of Florida, £ obligations of, So end agent and the starp	Such change was a ction 607.0505, Flo meable (NOTE RS	es, the abovi outhorized by rida Statutes E Registered Age 13. 1.1 TILE 1.2 NAME	e-named cor y the corpora s.	ition's board of directors. I hereby ac	DATE	ging its registered ant as registered CTORS IN 12
office or registered agent or both, in the agent i and accept the NATURE Stratus Typed with Constant Christian OFFICE F STD SCHAD, GARY 190 HIDDEN HILLS DR.	State of Florida, £ obligations of, So end agent and the starp	Such change was a ction 607.0505, Flo meable (NOTE RS	es, the above uuthorized by rida Statutes Registered Age 13. 1.3 TRLE 1.2 NAME 1.3 STREET	e-named cor y the corpora s. m signature requi	ition's board of directors. I hereby ac	DATE	ging its registered ant as registered CTORS IN 12
office or registered agent or both, in the agent i an familiar with and accept the NATURE Strand Operation OFFICE F STD SCHAD, GARY 1400-4655 190 HIDDEN HILLS DR.	State of Florida, £ obligations of, So end agent and the starp	Such change was a ction 607.0505, Flo meable (NOTE RS	es, the abovi outhorized by rida Statutes E Registered Age 13. 1.1 TILE 1.2 NAME	e-named cor y the corpora s. m signature requi	ition's board of directors. I hereby ac	DATE	crors IN 12 CTORS IN 12 Lange
office or registered agent or both, in the agent i am familiar with and accept the NATURE Strategy by the STD SCHAD, GARY 190 HIDDEN HILLS DR. ST-7/P ORMOND BEACH FL PD SCHAD, CAROL	State of Florida, £ obligations of, So end agent and the starp	Such change was a ction 607.0505, Flo mable (NOTE RS DELETE	Es, the above uthorized by rida Statutes 13. 1.1 Thte 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 Thte 2.2 NAME	e-named cor y the corpora s. ent signature requi	ition's board of directors. I hereby ac	PL	crors IN 12 CTORS IN 12 Lange
office or registered agent or both, in the agent i an familiar with and accept the NATURE TACLARS STD SCHAD, GARY OFFICE F STD SCHAD, GARY 190 HIDDEN HILLS DR. ORMOND BEACH FL PD SCHAD, CAROL 190 HIDDEN HILLS DR. 190 HIDDEN HILLS DR.	State of Florida, £ obligations of, So end agent and the starp	Such change was a ction 607.0505, Flo mable (NOTE RS DELETE	es, the above uthorized by rida Statutes 13. 1.1 TILE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TILE 2.2 NAME 2.3 STREET	ADDRESS	ition's board of directors. I hereby ac	PL	crors IN 12 CTORS IN 12 Lange
office or registered agent or both, in the agont i am familiar with and accept the NATURE Threats breater check OFFICE F	State of Florida, £ obligations of, So end agent and the starp	Such change was a ction 607.0505, Flo mable (NOTE RS DELETE	Es, the above uthorized by rida Statutes 13. 1.1 Thte 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 Thte 2.2 NAME	ADDRESS	ition's board of directors. I hereby ac	PL	ang its registered ant as registered CTORS IN 12 ange Addition
office or registered agent or both, in the agent i an familiar with and accept the NATURE TACLARS STD SCHAD, GARY OFFICE F STD SCHAD, GARY 190 HIDDEN HILLS DR. ORMOND BEACH FL PD SCHAD, CAROL 190 HIDDEN HILLS DR. 190 HIDDEN HILLS DR.	State of Florida, £ obligations of, So end agent and the starp	Duch change was a ction 607.0505, Flo	EROSING ACTION OF A CONTRACT O	ADDRESS	ition's board of directors. I hereby ac	DATE FICERS AND DIRE Cr	ang its registered ant as registered CTORS IN 12 ange Addition
off do or registered agent or both, in the agont i am familiar with and accept the NATURE Strategy Mithand Accept the OFFICE F	State of Florida, £ obligations of, So end agent and the starp	Duch change was a ction 607.0505, Flo	Bas, the above uthorized by Frequencies of the association of the asso	ADDRESS S1-ZIP	ition's board of directors. I hereby ac	DATE FICERS AND DIRE Cr	ang its registered ant as registered CTORS IN 12 ange Addition
off do or registered agent or both, in the agent 1 am familiar with and accept the NATURE Strategy with and accept the OFFICE F Strategy Mitches Strategy Areas and S	State of Florida, £ obligations of, So end agent and the starp	Duch change was a ction 607.0505, Flo	Bas, the above uthorized by Frequencies and approximately and 13. 1.1 TITLE 1.2 NAME 1.3 STRFET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STRFET 2.4 CITY- 3.1 TITLE 3.2 NAME	ADDRESS S1-ZIP	ition's board of directors. I hereby ac	DATE DATE FICERS AND DIRE Cr	ang its registered ant as registered CTORS IN 12 ange Addition
off de or registered agent or both, in the agent Lamitamiliar with and accept the NATURE Stratus Mission Michael Christian OFFICEF SCHAD, GARY 190 HIDDEN HILLS DR. Strates Strate PD SCHAD, CAROL 1400RES Strate PD SCHAD, CAROL 190 HIDDEN HILLS DR. SCHAD, CAROL 190 HIDDEN HILLS DR. SCHAD, CAROL 190 HIDDEN HILLS DR. ST-26	State of Florida, £ obligations of, So end agent and the starp	Duch change was a ction 607.0505, Flo mable (NOTE RS DELETE DELETE	Bas, the above uthorized by rida Statutes 13. 1.1 TITLE 1.2 NAME 1.3 STRFET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STRFET 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STRFET 3.4 CITY-	ADDRESS S1-ZIP	ition's board of directors. I hereby ac	DATE DATE FICERS AND DIRE Cr	ang its registered TORS IN 12 CTORS IN 12 nange Addition nange Addition
office or registered agent or both, in the agent Lam familiar with and accept the NATURE. Strate Strate blest in the set of the set	State of Florida, £ obligations of, So end agent and the starp	Duch change was a ction 607.0505, Flo mable (NOTE RS DELETE DELETE	Bas, the above uthorized by rida Statutes 13. 1.1 TILE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TILE 2.2 NAME 2.3 STREET 3.4 CITY- 3.3 STREET 3.4 CITY- 4.1 TILE 4.2 NAME 4.3 STREET	ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS ADDRESS ST-ZIP	ition's board of directors. I hereby ac	DATE DATE FICERS AND DIRE Cr	ang its registered TORS IN 12 CTORS IN 12 nange Addition nange Addition
office or registered agent or both, in the agent Lam familiar with and accept the NATURE. Stratus bjestic in Sector Control OFFICE F ACDRESS ST-7/P I ADDRESS	State of Florida, £ obligations of, So end agent and the starp	Duch change was a ction 607.0505, Flo mable (NOTE RS DELETE DELETE	Bas, the above uthorized by Fregistered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-5 2.1 TITLE 2.2 NAME 2.3 STREET 3.4 CITY- 3.3 STREET 3.4 CITY- 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-5	ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS ADDRESS ST-ZIP	ition's board of directors. I hereby ac	EL Purpose of change coept the appointme DATE FICERS AND DIRE Cr Cr Cr Cr Cr	ang its registered TORS IN 12 CTORS IN 12 nange Addition nange Addition
off de or registered agent or both, in the agent Land familiar with and accept the NATURE Straws blester Content chronic OFFICE F STD SCHAD, GARY 190 HIDDEN HILLS DR. S1-7/P PD SCHAD, CAROL 190 HIDDEN HILLS DR. S1-7/P HIDDEN HILLS HIDDEN HILLS DR. S1-7/P HIDDEN HILLS HIDDEN HIDDEN HILLS HIDDEN HIDDEN HILLS HIDDEN HI	State of Florida, £ obligations of, So end agent and the starp	Such change was a ction 607.0505, Flo mable (NOTE RS DELETE DELETE DELETE DELETE DELETE	Bas, the above uthorized by rida Statutes 13. 1.1 TILE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TILE 2.2 NAME 2.3 STREET 3.4 CITY- 3.3 STREET 3.4 CITY- 4.1 TILE 4.2 NAME 4.3 STREET	ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS ADDRESS ST-ZIP	ition's board of directors. I hereby ac	EL Purpose of change coept the appointme DATE FICERS AND DIRE Cr Cr Cr Cr Cr	ange Addition
office or registered agent or both, in the agent Lam familiar with and accept the NATURE Stratus breaks in the end of FTCEF OFFICE STD SCHAD, GARY 190 HIDDEN HILLS DR. ST-7/P ORMOND BEACH FL PD SCHAD, CAROL 190 HIDDEN HILLS DR. SI - 7/P ORMOND BEACH FL INTORESS SI - 2/P I ADDRESS SI - 2/P I ADDRES	State of Florida, £ obligations of, So end agent and the starp	Such change was a ction 607.0505, Flo mable (NOTE RS DELETE DELETE DELETE DELETE DELETE	Bis, the above uthorized by Flogistered Age 13. 1.1 TILE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TILE 2.2 NAME 2.3 STREET 3.4 CITY- 3.1 TILE 3.2 NAME 3.3 STREET 3.4 CITY- 4.1 TILE 4.2 NAME 4.3 STREET 4.4 CITY- 5.1 TILE 5.2 NAME	ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS ADDRESS ST-ZIP	ition's board of directors. I hereby ac	EL Purpose of change coept the appointme DATE FICERS AND DIRE Cr Cr Cr Cr Cr	ange Addition
off de or registered agent or both, in the agent Land familiar with and accept the NATURE Strategy with and accept the OFFICE F Strategy Branch break a Context of break STD SCHAD, GARY 190 HIDDEN HILLS DR. Strategy Branch CAROL 190 HIDDEN HILLS DR. Strategy Branch BEACH FL PD SCHAD, CAROL 190 HIDDEN HILLS DR. Strategy Branch BEACH FL	State of Florida, £ obligations of, So end agent and the starp	Duch change was a ction 607.0505, Flo	Bis, the above uthorized by Flogistered Age 13. 1.1 TILE 1.2 NAME 1.3 STREET 1.4 CITY-5 2.1 TILE 2.2 NAME 2.3 STREET 3.4 CITY- 3.1 TILE 3.2 NAME 3.3 STREET 3.4 CITY- 4.1 TILE 4.2 NAME 4.3 STREET 4.4 CITY-5 5.1 TILE 5.2 NAME 5.3 STREET 5.4 CITY-6 5.4 CITY-7 5.4 CITY-7 5.1 STREET 5.4 STREET	ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP	ition's board of directors. I hereby ac	EL ine purpose of change coept the appointme DATE FICERS AND DIRE Cr Cr Cr Cr Cr Cr Cr Cr Cr Cr	ange Addition
off color registered agent or both, in the agent is an familiar with and accept the NATURE Stratus breats in the OFFICE F ST ADJAESS	State of Florida, £ obligations of, So end agent and the starp	Such change was a ction 607.0505, Flo mable (NOTE RS DELETE DELETE DELETE DELETE DELETE	Bits The above approximation (12ed by privide) Engistered Ageneric approximation (12ed by privide) 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2 NAME 2.3 STREET 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY- 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY- 5.1 TITLE 5.1 TITLE 5.2 NAME 5.3 STREET 5.4 CITY- 6.1 TITLE	ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP	ition's board of directors. I hereby ac	EL ine purpose of change coept the appointme DATE FICERS AND DIRE Cr Cr Cr Cr Cr Cr Cr Cr Cr Cr	ange Addition
off de or registered agent or both, in the agent Lam familiar with and accept the NATURE Stratus breats in Strates et al. OFFICE Stratus breats in Strates et al. OFFICE Stratus breats in Strates et al. Stratus breats in Strates et al. Stratus breats et al. Stratus	State of Florida, £ obligations of, So end agent and the starp	Duch change was a ction 607.0505, Flo	Bis, the above uthorized by Flegistered Agenetic 13. 1.3 TILE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TILE 2.2 NAME 3.3 STREET 3.4 CITY- 4.1 TILE 4.2 NAME 4.3 STREET 4.4 CITY- 5.1 TILE 5.2 NAME 5.3 STREET 5.4 CITY- 5.1 TILE 5.2 NAME 5.3 STREET 5.4 CITY- 5.1 TILE 5.2 NAME 5.3 STREET 5.4 CITY- 5.1 TILE 5.4 CITY- 5.1 TILE 5.2 NAME 5.3 STREET 5.4 CITY- 5.1 TILE 5.2 NAME 5.3 STREET 5.4 CITY- 5.1 TILE 5.4 CITY- 5.1 TILE 5.2 NAME 5.3 STREET 5.4 CITY- 5.1 TILE 5.4 CITY- 5.4 CITY	e-named cor y the corpora s. ADDRESS S1-ZIP ADDRESS S1-ZIP I ADDRESS S1-ZIP I ADDRESS S1-ZIP I ADDRESS S1-ZIP	ition's board of directors. I hereby ac	EL ine purpose of change coept the appointme DATE FICERS AND DIRE Cr Cr Cr Cr Cr Cr Cr Cr Cr Cr	ange Addition
off de or registered agent or both, in the agent Lamitamiliar with and accept the NATURE Strates biestere Stream chronic OFFICE F SCHAD, GARY 190 HIDDEN HILLS DR. S1-7# PD SCHAD, CAROL 190 HIDDEN HILLS S1-7# PD SCHAD, S1-	 State of Florida, S obligations of, Se endaged and the same state of SAND DIRECTO 	Duch change was a ction 607.0505, Flo	Bas The above puthorized by rida Statutes Engistered Age 13 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-5 2.1 TITLE 2 NAME 2.3 STREET 3.4 CITY-5 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-5 3.4 CITY-5 1.1 TITLE 4.2 NAME 4.3 STREET 3.4 CITY-5 5.1 TITLE 5.2 NAME 5.3 STREET 5.3 STREET 5.4 CITY-5 5.1 TITLE 5.2 NAME 5.3 STREET 5.4 CITY-5 6.1 TITLE 6.2 NAME 6.3 STREET 6.4 CITY-5	ADDRESS S1-ZIP ADDRESS S1-ZIP ADDRESS S1-ZIP ADDRESS S1-ZIP ADDRESS S1-ZIP ADDRESS S1-ZIP ADDRESS S1-ZIP	tion's board of directors. I hereby an		ging its registered ctors in 12 lange Addition hange Addition
off de or registered agent or both, in the agent Land familiar with and accept the NATURE Strategy with and accept the OFFICE F STD SCHAD, GARY 190 HIDDEN HILLS DR. ST-7/P PD SCHAD, CAROL 190 HIDDEN HILLS DR. SL-7/P CHADRESS SL-2/F CADRESS SL-2/F	 State of Florida, S obligations of, Se ereitages and the Capital SAND DIRECTO 	Such change was a ction 607.0505, Flo mable (NOTE RS DELETE DELETE DELETE DELETE DELETE DELETE DELETE	Bas the above uthorized by uthorized by initial Statutes initial Statutes 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 2.1 TITLE 2.2 NAME 3.3 STREET 3.4 CITY-S 3.4 CITY- 4.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY- 4.1 TITLE 4.2 NAME 5.3 STREET 5.1 IfTLE 5.2 NAME 5.3 STREET 5.4 CITY-S 6.1 TITLE 6.2 NAME 6.3 STREET 6.4 CITY-S 6.1 TITLE 6.2 NAME 6.3 STREET 6.4 CITY-S	ADDRESS S1-ZIP ADDRESS S1-ZIP ADDRESS S1-ZIP ADDRESS S1-ZIP ADDRESS S1-ZIP ADDRESS S1-ZIP ADDRESS S1-ZIP ADDRESS S1-ZIP	tion's board of directors. I hereby ac		ange Addition Tange Addition Tange Addition Tange Addition Tange Addition
off do or registered agent or both, in the agont Lam familiar with and accept the NATURE Strategy with and accept the OFFICE F Strategy Mitches Strategy OFFICE F Strategy ORMOND BEACH FL PD SCHAD, CAROL 190 HIDDEN HILLS DR. ST-7# PD SCHAD, CAROL 190 HIDDEN HILLS 100 HI	Estate of Florida, S obligations of, Se endaged and the Cap 4S AND DIRECTO	Such change was a ction 607.0505, Flo mable (NOTE RS DELETE DELETE DELETE DELETE If g does not qualif If annual report is tr for truste empty	as, the above uthorized by Flogistered Age 13. 1.1 TILE 1.2 NAME 1.3 STREET 1.4 CITY-5 2.1 TILE 2.2 NAME 2.3 STREET 2.4 CITY- 3.1 TILE 3.2 NAME 3.3 STREET 3.4 CITY- 4.1 TILE 4.2 NAME 4.3 STREET 4.4 CITY- 5.1 TILE 5.2 NAME 5.3 STREET 5.4 CITY- 6.1 TILE 6.2 NAME 6.3 STREET 6.4 CITY- 1.4 CITY- 5.1 TILE 5.2 NAME 5.3 STREET 5.4 CITY- 5.1 TILE 5.4 CITY- 5.1 TILE 5.2 NAME 5.3 STREET 5.4 CITY- 5.1 TILE 5.1 TILE 5.2 NAME 5.3 STREET 5.4 CITY- 5.1 TILE 5.2 NAME 5.3 STREET 5.4 CITY- 5.1 TILE 5.4 CITY- 5.1 TILE 5.2 NAME 5.3 STREET 5.4 CITY- 5.1 TILE 5.2 NAME 5.3 STREET 5.4 CITY- 5.1 TILE 5.4 CITY- 5.1 TILE 5.2 NAME 5.3 STREET 5.4 CITY- 5.1 TILE 5.2 NAME 5.3 STREET 5.4 CITY- 5.1 TILE 5.4 CITY- 5.1 TILE 5.7 STREET 5.4 CITY- 5.7 STREET 5.4 CITY- 5.7 STREET 5.4 CITY- 5.1 TILE 5.2 NAME 5.3 STREET 5.4 CITY- 5.1 TILE 5.4 CITY- 5.1 TILE 5.4 CITY- 5.1 TILE 5.4 CITY- 5.1 TILE 5.4 CITY- 5.1 STREET 5.4 CITY- 5.4 CIT	ADDRESS S1-ZIP ADDRESS S1-ZIP ADDRESS S1-ZIP ADDRESS S1-ZIP ADDRESS S1-ZIP ADDRESS S1-ZIP ADDRESS S1-ZIP ADDRESS S1-ZIP	tion's board of directors. I hereby ac		ange Addition Tange Addition Tange Addition Tange Addition Tange Addition