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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

SIGNATURE:

DOCUMENT # J
1. Corporation Name

J29256

(1)

GAZEBO SYSTEMS, INC.

	SU SYSTEMS, INC.							
Principal Place of	f Business	Mailing Address			f fübitlä ättä tinin inila itana a	1115 6111 61511 61	yı, 0.4., s.	
1420-C CESI	ERY BLVD LLE FL 32211	1420-C CESERY BLV JACKSONVILLE FL 3						
<i>0.10.100.1111</i>					3. Date Incorporated or Qualified 08/19/1986	3a. Date (of Last Re)4/24/1	
2. Principal Plac	e of Business	2a. Mailing Address			4. FEI Number	<u></u>	A	pplied For
	0.0000000	26			59-2708182			lot Applicable
Suite, Apt. #,	etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		-	Additional Required
City & State		City & State			Election Campaign Financing Trust Fund Contribution		,	May Be I to Fees
Zip	Country	Zip	Coun	lry	B. This corporation has liability for in Florida Statutes Yes	intangible tax	under s	199.032,
1	9. Name and Address of Curren	29 nt Registered Agent	1301		10. Name and Address of New R		gent	
	9. Name and Address of Curren	in regional or right		31 Name				
	SON, BRUCE M.		1	32 Street Addr	ress (P.O. Box Number is Not Acceptat	ole)		·
	CESERY BLVD	ļ		B3				
JACKS	ONVILLE FL 32211			84 City		FL	85 Zip	Code
					ration submits this statement for the pu	rnose of char	noina its r	egistered office
Or rogistoro	d agent, or both, in the State of Flor and accept the obligations of, Sec	ina such change was authorz		orporation's boa	and of directors. I hereby accept the app	pointment as i	registered	agent. I am
ICELLINGS AALCI								
SCHATLIBE	Sunature, typed or printed name of registered ager	nt and title if applicable (No	TL: Registered	Agent signature require	ed when reinstating)	DATE		
SIGNATURE _	Signature, typed or printed name of registered agen OFFICERS Af	ND DIRECTORS	TE: Registered /	Agent signature require	ed when renstating) ADDITIONS/CHANGES TO OFF	FICERS AND		
SIGNATURE					ed when renstating! ADDITIONS/CHANGES TO OFF	FICERS AND	DIRECTO	PRS IN 12
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INTED NAME OF SIGNING OFFICER OR DIRECTOR

4-17-96 (904)744-2450