Superior	CORF ANNU	POFIT PORATION AL REPORT	Sandra Secret DIVISION OF	RIMENT OF STATE B. Mortharn ary of State CORPORATIONS			
Maining Address South Wallety RD Power EVDNA BCH FL 20022 US Supply			35 (5)	K38580			
April Walter RD Substitutes Substitute	THE F	REAGOR GROUP, INC.					
PONTE VERDE FL 32082 US SUB-Incorporated or Outsided A Date Incorporated or Outside Incorporated or Incorporated Incorporated or Incorporated	•		-	Ph	371	4	,, 4,4,, 4,5,, ,6
Enricipal Place of Business 25. Molling Address 4. FE Number 59-2920727 Applied For Not Acceptable 36. Suite April 4, etc. 5. Certificate of Status Desired 58.75 Additional Fores Required 6. Country 5. Certificate of Status Desired 6. Country 5. Certificate of Status Desired 5. Suite April 4, etc. 5. Certificate of Status Desired 5. Suite Additional Fores Required 6. Country 6. Country 6. Country 7. Country	PONTE VER		PONTE VEDRA BCI				
Surie, Apt. 4, etc. 27 Surie, Apt. 4, etc. 28 Surie, Apt. 4, etc. 28 Surie, Apt. 4, etc. 28 Surie, Apt. 4, etc. 29 Surie, Apt. 4, etc. 20 Surie, Apt. 4, etc.	¬ `	ce of Business	}		4. FFI Number	727	
City & State 20 20 20 20 20 20 20 2	Suite, Apt. #	, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75	Additional
20 28 29 30 30 8. This corporation has fability for intengible tax under s 199.032, Provide Statutes	City & State		City & State		_	\$5.00	May Be
B. Name and Address of Current Registered Agent B. Name Name	Zip	 	Zip		B. This corporation has liability for	or intangible tax under s	
DAVID H. BOOHER, III 2024 HENDRICKS AVENUE JACKSONVILLE, FL 32207 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutus, the above-harmed corporation submits this statement for the purpose of changing list registered agent, or both, in the State of Florida. Such change was subhorized by the corporation's board of directors. I hereby accept the appointment as registered agent. If at familiar with, and accept the obligations of Section 607.0505, florida Statutus, the above-harmed corporation's board of directors. I hereby accept the appointment as registered agent. If at familiar with, and accept the obligations of Section 607.0505, florida Statutus, and accept the obligations of Section 607.0505, florida Statutus, and accept the obligations of Section 607.0505, florida Statutus, and accept the obligations of Section 607.0505, florida Statutus, and accept the obligations of Section 607.0505, florida Statutus, and accept the obligations of Section 607.0505, florida Statutus, and accept the obligations of Section 607.0505, florida Statutus, and accept the obligations of Section 607.0505, florida Statutus, and accept the obligations of Section 607.0505, florida Statutus, and accept the obligation of Change of Change in Additional Statutus, and accept the obligation of Change in Additional Statutus, and accept the obligation of Change in Additional Statutus, and accept the obligation of Change in Additional Statutus, and accept the obligation of Change in Additional Statutus, and accept the appointment as registered agent. I at the corporation's board of directors. I hereby accept the appointment as registered agent. I at the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligation of Change in Additional Statutus, and accept the obligation of Change in Additional Statutus, and accept the appointment as registered agent, and accept the appointment as registered agent, and accept the appointment as registered agent, and accept the	<u> </u>	11		1			
2024 HENDRICKS AVENUE JACKSONVILLE, FL 32207 88	DAVIT	n u ponuco III			uss (P.O. Box Number is Not Accept	tablei	
The previsions 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 authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. It are familier with, and accept the obligations of. Section 607.0505. Florida Statutes. SIGNATURE To provide the obligations of. Section 607.0505. Florida Statutes. Provide Corporation's board of directors. I hereby accept the appointment as registered agent. It are familier with, and accept the obligations of. Section 607.0505. Florida Statutes. Provide Corporation's board of directors. I hereby accept the appointment as registered agent. It are familier with an applicable. Provide Corporation's board of directors. I hereby accept the appointment as registered agent. It are familier with a provide agent a	· · · · · · · · · · · · · · · · · · ·						
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 spent, or both in the State of Rorda. Such change was suthorized by the corporation's board of directors. I hereby accept the appointment as registered agent. It are familier with, and accept the obligations of. Section 607.0505. Florida Statutes. SIGNATURE To Provide the purpose of changing its registered agent. It are familier with, and accept the obligations of. Section 607.0505. Florida Statutes. SIGNATURE To Provide the purpose of changing its registered agent. It are familier with, and accept the obligations of. Section 607.0505. Florida Statutes. SIGNATURE To Provide the purpose of changing its registered agent. It are familier with a population submits this statement for the purpose of changing its registered agent. It are familier with a population submits this statement for the purpose of changing its registered agent. It are familier with a population submits this statement for the purpose of changing its registered agent. It are familier with a population of the purpose of change in the purpose of change i	7117A	HENDRICKS AVENUE		83			
TITLE	JACK	SONVILLE, FL 3220		84 City		FL []	
NAME REAGOR, KEITH STREET ADDRESS CITY-ST-ZIP PONTE VEDRA BEACH FL TITLE CRAIG F. REAGOR 1 MEREDITH DRIVE CITY-ST-ZIP TITLE NAME STREET ADDRESS 1 MEREDITH DRIVE CITY-ST-ZIP TITLE NAME 32 STREET ADDRESS 1 MEREDITH DRIVE CITY-ST-ZIP TITLE NAME 32 STREET ADDRESS 3.1 STREET ADDRESS 3.1 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 3.1 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 4.1 TITLE ACITY-ST-ZIP CHANGE ACITY-ST-ZIP DELETE 5.1 STREET ADDRESS CITY-ST-ZIP DELETE 5.1 STREET ADDRESS CITY-ST-ZIP CHANGE ACITY-ST-ZIP DELETE 5.1 STREET ADDRESS CITY-ST-ZIP CHANGE ACITY-ST-ZIP ACITY-S	JACK 11. Pursuant to or register familiar with SIGNATURE	SONVILLE, FL 3220 of the provisions of Sections 607.050 ed agent, or both, in the State of Florin, and accept the obligations of Sec	2 and 607.1508, Florida Statudda. Such change was author ction 607.0505, Florida Statute	84 City utes, the above-named corporation's boates.	ard of directors. I hereby accept the a	purpose of changing its ri ppointment as registered	egistered of agent. I am
City-st-zip	JACK 11. Pursuant to register familiar with SIGNATURE 12.	SONVILLE, FL 3220 of the provisions of Sections 607.050 ed agent, or both, in the State of Florin, and accept the obligations of, Sec Eigneture, typed or privide name of registered age OFFICERS AN	22 and 607.1508, Florida Statuda. Such change was author ction 607.0505, Florida Statute at and title if applicable.	84 City Ites, the above-named corporation's books. WOTE: Registered Agent signature requirements.	ard of directors. I hereby accept the a	purpose of changing its reppointment as registered	egistered of agent. I am
NAME CRAIG F. REAGOR 22 NAME 23 STREET ADDRESS 1 MEREDITH DRIVE 24 CITY-ST-ZIP Change Addit	JACK 11. Pursuant tor register familiar with SIGNATURE 12. TITLE	SONVILLE, FL 3220 of the provisions of Sections 607.050 ed agent, or both, in the State of Flor h, and accept the obligations of, Sec Signature, typed or printed name of registered age OFFICERS AND REAGOR, KEITH	22 and 607.1508, Florida Statuda. Such change was author ction 607.0505, Florida Statute at and title if applicable.	84 City Utes, the above-named corporation's boats. NOTE: Registered Agent signature required 13. 1.1 Title 1.2 NAME	ard of directors. I hereby accept the a	purpose of changing its reppointment as registered	egistered of agent. I am
STREET ADDRESS 1 MEREDITH DRIVE 23 STREET ADDRESS 24 CITY-ST-ZIP	JACK 11. Pursuant to register familiar with SIGNATURE 12. TITLE NAME \$TREET ADDRESS CRY-ST-ZIP	SONVILLE, FL 3220 of the provisions of Sections 607.050 of agent, or both, in the State of Floring, and accept the obligations of, Sec Signature, typed or private name of registered age OFFICERS AND REAGOR, KEITH 5045 PALM, VALLEY RD. PONTE VEDRA BEACH FI	02 and 607.1508, Florida Staturida. Such change was author ction 607.0505, Florida Statute and title if applicable. OND DIRECTORS DELETE	84 City Utes, the above-named corporation's books. NOTE: Registered Agent signature required 13. 1.1 Title 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	ard of directors. I hereby accept the a	purpose of changing its reppointment as registered DATE DATE Change	egistered of agent. I am
CITY-ST-ZIP	11. Pursuant to register familiar with SIGNATURE	SONVILLE, FL 3220 of the provisions of Sections 607.050 ed agent, or both, in the State of Floring, and accept the obligations of, Sec Signature, typed or private name of registered age OFFICERS AND REAGOR, KEITH 5045 PALM, VALLEY RD. PONTE VEDRA BEACH FI	02 and 607.1508, Florida Staturida. Such change was author ction 607.0505, Florida Statute and title if applicable. OND DIRECTORS DELETE	84 City Ites, the above-named corporation's bodies. VOTE: Registered Agent signature required to the corporation's bodies. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE	ard of directors. I hereby accept the a	purpose of changing its reppointment as registered DATE DATE Change	egistered of agent. I am
STREET ADDRESS 3.3. STREET ADDRESS 3.4. CITY-ST-ZIP	JACK 11. Pursuant to or register familiar with signature 12. TITLE NAME \$TREET ADDRESS CITY-\$T-ZIP TITLE NAME \$TREET ADDRESS	SONVILLE, FL 3220 of the provisions of Sections 607.050 ed agent, or both, in the State of Florin, and accept the obligations of, Sections, typed or private name of registered age OFFICERS AND REAGOR, KEITH 5045 PALM, VALLEY RD. PONTE VEDRA BEACH FI	D2 and 607.1508, Florida Staturida. Such change was authorotion 607.0505, Florida Statutent and title if applicable. ND DIRECTORS DELETE	84 City Ites, the above-named corporation's books. NOTE: Registered Agent signature requirements of the second signature requirements. 1.1 Title. 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS	ard of directors. I hereby accept the a	purpose of changing its reppointment as registered DATE DATE Change	egistered of agent. I am
STREET ADDRESS STRE	JACK 11. Pursuant to register familiar with SIGNATURE 12. TITLE NAME \$TREET ADDRESS CITY-ST-ZIP TITLE NAME	SONVILLE, FL 3220 of the provisions of Sections 607.050 ed agent, or both, in the State of Florin, and accept the obligations of, Sections, the State of Floring and accept the obligations of, Sections, the State of Floring and accept the obligations of, Sections, and accept the obligations of, Sections, and accept the obligations of, Sections,	22 and 607.1508, Florida Staturida. Such change was author obtion 607.0505, Florida Statute of and bile if applicable. **ND DIRECTORS** DELETE** DELETE**	84 City utes, the above-named corporation's bodies. VOTE: Registered Agent signature required to the corporation's bodies. 13. 1.1 Title 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	ard of directors. I hereby accept the a	purpose of changing its reppointment as registered DATE DEFICERS AND DIRES: Change	egistered of agent. I am
MAME	JACK 11. Pursuant to register familiar with signature 12. Title NAME \$TREET ADDRESS CITY-ST-ZIP TITLE NAME \$TREET ADDRESS CITY-ST-ZIP TITLE NAME \$TREET ADDRESS CITY-ST-ZIP TITLE NAME	SONVILLE, FL 3220 of the provisions of Sections 607.050 ed agent, or both, in the State of Florin, and accept the obligations of, Sections, the State of Floring and accept the obligations of, Sections, the State of Floring and accept the obligations of, Sections, and accept the obligations of, Sections, and accept the obligations of, Sections,	22 and 607.1508, Florida Staturida. Such change was author obtion 607.0505, Florida Statute of and bile if applicable. **ND DIRECTORS** DELETE** DELETE**	84 City utes, the above-named corporation's bodies. NOTE: Registered Agent signature requirements of the corporation's bodies. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME	ard of directors. I hereby accept the a	purpose of changing its reppointment as registered DATE DEFICERS AND DIRES: Change	egistered of agent. I am
### 225.00 ### 225.00 ### 225.00 ### 225.00 ### 225.00 ### 225.00 ### 225.00 ### 225.00 ### 225.00 ### 225.00 ### 225.00 ### 225.00	JACK 11. Pursuant to or register familiar with signature 12. Title NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	SONVILLE, FL 3220 of the provisions of Sections 607.050 ed agent, or both, in the State of Florin, and accept the obligations of, Sec Signature, typed or private name of registered age OFFICERS AND REAGOR, KEITH 5045 PALM, VALLEY RD. PONTE VEDRA BEACH FI CRAIG F. REAGOR 1 MEREDITH DRIVE	D2 and 607.1508, Florida Staturida. Such change was author ottion 607.0505, Florida Statute ont and tille if applicable. OND DIRECTORS DELETE DELETE DELETE	84 City Ites, the above-named corporation's books. NOTE: Registered Agent signature requirements of the corporation's books. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3. STREET ADDRESS	ard of directors. I hereby accept the a	purpose of changing its reppointment as registered DATE DEFICERS AND DIRES: Change Change	egistered of agent. I am
DELETE D	JACK 11. Pursuant to or register familiar with signature 12. Title NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	SONVILLE, FL 3220 of the provisions of Sections 607.050 ed agent, or both, in the State of Florin, and accept the obligations of, Sec Signature, typed or private name of registered age OFFICERS AND REAGOR, KEITH 5045 PALM, VALLEY RD. PONTE VEDRA BEACH FI CRAIG F. REAGOR 1 MEREDITH DRIVE	D2 and 607.1508, Florida Staturida. Such change was author ottion 607.0505, Florida Statute ont and tille if applicable. OND DIRECTORS DELETE DELETE DELETE	ates, the above-named corporation's books. NOTE: Registered Agent signature requirements of the corporation's books. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3. STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE	ard of directors. I hereby accept the a	purpose of changing its reppointment as registered DATE DEFICERS AND DIRES: Change Change	egistered of agent. I am
NAME	JACK 11. Pursuant to or register familiar with signature 12. Title NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	SONVILLE, FL 3220 of the provisions of Sections 607.050 ed agent, or both, in the State of Florin, and accept the obligations of, Sec Signature, typed or private name of registered age OFFICERS AND REAGOR, KEITH 5045 PALM, VALLEY RD. PONTE VEDRA BEACH FI CRAIG F. REAGOR 1 MEREDITH DRIVE	D2 and 607.1508, Florida Staturida. Such change was author ottion 607.0505, Florida Statute ont and tille if applicable. OND DIRECTORS DELETE DELETE DELETE	84 City Ites, the above-named corporation's books. NOTE: Registered Agent signature required to the corporation's books. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3. STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS	ard of directors. I hereby accept the a	purpose of changing its reppointment as registered DATE DEFICERS AND DIRES: Change Change	egistered of agent. I am
STREET ADDRESS	JACK 11. Pursuant I or register familiar with signature 12. Title NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	SONVILLE, FL 3220 of the provisions of Sections 607.050 ed agent, or both, in the State of Florin, and accept the obligations of, Sec Signature, typed or private name of registered age OFFICERS AND REAGOR, KEITH 5045 PALM, VALLEY RD. PONTE VEDRA BEACH FI CRAIG F. REAGOR 1 MEREDITH DRIVE	DELETE DELETE	### ### ##############################	and of directors. I hereby accept the and when refeatating) ADDITIONS CHANGES TO C	DATE DATE DATE DATE Change Change	egistered of agent. I am
TITLE DELETE 6.1 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS 6.4 STREET ADDRESS 6.4 STREET ADDRESS	JACK 11. Pursuant to or register familiar with signature 12. Title NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	SONVILLE, FL 3220 of the provisions of Sections 607.050 ed agent, or both, in the State of Florin, and accept the obligations of, Sec Signature, typed or private name of registered age OFFICERS AND REAGOR, KEITH 5045 PALM, VALLEY RD. PONTE VEDRA BEACH FI CRAIG F. REAGOR 1 MEREDITH DRIVE	DELETE DELETE	### A City Ites, the above-named corporation's book ized by the corporation's book is. #### Application of the corporation's book is. ##################################	and of directors. I hereby accept the and when refratering) ADDITIONS/CHANGES TO C	DATE DATE DATE DATE DATE Change Change	egistered of agent. I am
\$TREET ADDRESS	JACK 11. Pursuant to or register familiar with signature 12. Title NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	SONVILLE, FL 3220 of the provisions of Sections 607.050 ed agent, or both, in the State of Florin, and accept the obligations of, Sec Signature, typed or private name of registered age OFFICERS AND REAGOR, KEITH 5045 PALM, VALLEY RD. PONTE VEDRA BEACH FI CRAIG F. REAGOR 1 MEREDITH DRIVE	DELETE DELETE	R4 City ates, the above-named corporation's books. NOTE: Registered Agent signature required to the corporation's books. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3. STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS	and of directors. Thereby accept the and when refratering) ADDITIONS CHANGES TO C	DATE DATE DATE DATE DEFICERS AND DIRES: Change Change Change Change Change	egistered of agent. I am
C 4 ATTA C T DO	JACK 11. Pursuant is or register familiar with signature. 12. Title NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	SONVILLE, FL 3220 of the provisions of Sections 607.050 ed agent, or both, in the State of Florin, and accept the obligations of, Sec Signature, typed or private name of registered age OFFICERS AND REAGOR, KEITH 5045 PALM, VALLEY RD. PONTE VEDRA BEACH FI CRAIG F. REAGOR 1 MEREDITH DRIVE	DELETE DELETE DELETE	ates, the above-named corporation's books. **OTE: Registered Agent signature required by the corporation's books. **ITTILE	and of directors. Thereby accept the and when refratering) ADDITIONS CHANGES TO C	DATE DATE DATE DATE DEFICERS AND DIRES: Change Change Change Change Change	egistered of agent. I am
14. I do nereby certify that the information supplied with this image so be related and that my signature shall have the same legal effect as if made unk certify that the information indicated on this annual report or supplied report is true and accurate and that my signature shall have the same legal effect as if made unk certify that the information indicated on this annual report or supplied report is true and accurate and that my signature shall have the same legal effect as if made unk certify that the information indicated on this annual report or supplied with the information indicated on this annual report as prepared by Chapter 607, Florida Statutes; and that my name and indicated on the corporation or the receipter or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name and indicated on the corporation or the receipter or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name and indicated on the corporation or the receipter or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name and indicated on the corporation of the corporation or the receipter or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name and the corporation of the cor	JACK 11. Pursuant to or register familiar with signature 12. Title NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME NAME	SONVILLE, FL 3220 of the provisions of Sections 607.050 ed agent, or both, in the State of Florin, and accept the obligations of, Sec Signature, typed or private name of registered age OFFICERS AND REAGOR, KEITH 5045 PALM, VALLEY RD. PONTE VEDRA BEACH FI CRAIG F. REAGOR 1 MEREDITH DRIVE	DELETE DELETE DELETE	R4 City Ites, the above-named corporation's books. NOTE: Registered Agent signature required by the corporation's books. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3. STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME	and of directors. Thereby accept the and when refratering) ADDITIONS CHANGES TO C	DATE DATE DATE DATE DEFICERS AND DIRES: Change Change Change Change Change	egistered of agent. I am
	JACK 11. Pursuant to or register familiar with signature	SONVILLE, FL 3220 of the provisions of Sections 607.050 ed agent, or both, in the State of Flor h, and accept the obligations of, Sec Signature, typed or privated name of registered age OFFICERS AN D REAGOR, KEITH 5045 PALM, VALLEY RD. PONTE VEDRA BEACH FI D CRAIG F. REAGOR 1 MEREDITH DRIVE RIVERWOOD, IL	DELETE DELETE DELETE DELETE	R4 City Utes, the above-named corporation's books. NOTE: Registered Agent separative required to the corporation's books. NOTE: Registered Agent separative required to the corporation's books. 1.1 Title 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.5 STREET ADDRESS 5.5 STREET ADDRES	1 0000 1 -06/26/96 ***225.00	DATE DATE DATE DATE Change Change Change Change Change	egistered of agent. I am S IN 12 Addition Addition Addition Addition