COF	ILE NOW: FILIN PROFIT RPORATION JAL REPORT 1997		FLORIDA DEPA Sandra I Socreta	RIMENT OF STATE B. Mortham ary of State CORPØRATIONS	May 05	TLED 1997 8:00a tary of State
VIDEO W		INC. 	(7) ailing Address 7 WEST HIGHWAY 40 ALA FL 34482			
		US			3. Date Incorporated or Qualifico 01/11/1989	08/09/1996
Principal P	lace of Business	28.	Mailing Address		4. FEI Number 59-2924478	Applied For Not Applicable
Suite, Apt	#, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State	θ	27	City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	28	Zip	Country	Trust Fund Contribution 8. This corporation has liability for	Added to Fees
	25 9. Name and Address	29	4	30	Florida Statutes	Yes 🗋 No
SHEL	NUTT, MARK D.	s of Current Regis	tereo Agent	81 Namo	10. Name and Address of New F	legistered Agent
	NORTHEAST EIGHTH A	VENHE		82 Street Add	Iress (P.O. Box Number is Not Accept	able)
					nood (n.o. Elek manipel to Hornebap)	
	LA FL 32670			83		
		WENDE				B5 Zin Code
OCA	LA FL 32670	ns 607 0502 and 6	07.1508, Florida Statu	83 84 City Ites the above named cor	poration submits this statement for the	FL 85 Zip Code
OCA 1. Pursuant office or r agent. I a bigNATURE	LA FL 32670 to the provisions of Sectio egistered agont, or both, im familiar with, and accep Signature, typod or printed name of	ins 607.0502 and 6 in the State of Flori pl the obligations o trepisticed agen and Mic	da. Such change was [, Section 607.0505, F [tapplicable. (NO	83 84 City Ites, the above-named cor authorized by the corpora lorida Statutes.	poration submits this statement for the ation's board of directors. I hereby acc	FL 85 Zip Code purpose of changing its registered ept the appointment as registered
OCA 1. Pursuant office or r agent. I a IGNATURE 2.	LA FL 32670 to the provisions of Sectio egistered agent, or both, im familiar with, and accep <u>Signature, typod or printed name of</u> OFF	ns 607.0502 and 6 in the State of Flori pl the obligations o	da. Such change was [, Section 607.0505, F [tapplicable. (NO	83 84 City ites, the above-named cor authorized by the corpora lorida Statutes.	poration submits this statement for the ation's board of directors. I hereby acc	FL 85 Zip Code purpose of changing its registered ept the appointment as registered
OCA 1. Pursuant office or r agent. I a IGNATURE 2. TLE AME	LA FL 32670 to the provisions of Sectio egistered agont, or both, im familiar with, and accep Signature, typod or printed name of OFF P HOUSER, R. L.	ins 607.0502 and 6 in the State of Flori pl the obligations o freqistered agent and the FICERS AND DIRE (da. Such change was I, Section 607.0505, F Implication (NO CTORS	83 84 City Ites, the above-named cor- authorized by the corpora- lorida Statutes. 1.: Registered Agric signature requi- 13. 1.1 TILE 1.2 NAME	poration submits this statement for the ation's board of directors. I hereby acc	FL 85 Zip Code purpose of changing its registered ept the appointment as registered DATI ICERS AND DIRECTORS IN 12
OCA 1. Pursuant office or r agent. I a IGNATURE 2. ILE AME IREET ADORESS	to the provisions of Section registered agent, or both, im familiar with, and accep Signature, typod or printed name of OFF P HOUSER, R. L. 5731 S.W. 62ND PLA	ins 607.0502 and 6 in the State of Flori pl the obligations o freqistered agent and the FICERS AND DIRE (da. Such change was I, Section 607.0505, F Implication (NO CTORS	83 84 City Ites, the above-named corrauthorized by the corporatorial statutes. It: Registered Agric signature required to the corporation of the corpo	poration submits this statement for the ation's board of directors. I hereby acc	FL 85 Zip Code purpose of changing its registered ept the appointment as registered DATI ICERS AND DIRECTORS IN 12
OCA 1. Pursuant office or r agent. I a	LA FL 32670 to the provisions of Sectio egistered agent, or both, im familiar with, and accep Signature, typed or printed name o OFF P HOUSER, R. L. 5731 S.W. 62ND PLAI OCALA FL S	ins 607.0502 and 6 in the State of Flori pl the obligations o freqistered agent and the FICERS AND DIRE (da. Such change was I, Section 607.0505, F Implication (NO CTORS	83 84 City Ites, the above-named cor- authorized by the corpora- lorida Statutes. 1.: Registered Agric signature requi- 13. 1.1 TILE 1.2 NAME	poration submits this statement for the ation's board of directors. I hereby acc	B5 Zip Code purpose of changing its registered ept the appointment as registered DATI TCERS AND DIRECTORS IN 12
OCA 1. Pursuant office or r agent. I a IGNATURE 2. IGNATURE 2. IREET ADDRESS IY-ST-2IP TLE IME	LA FL 32670 to the provisions of Sectio egistered agent, or both, im familiar with, and accep Signature, typed or printed name of OFF P HOUSER, R. L. 5731 S.W. 62ND PLAI OCALA FL S HOUSER, MARGIE D	ins 607.0502 and 6 in the State of Flori pl the obligations o freqistered agent and the FICERS AND DIRE (da Such change was 1, Section 607.0505, F Il emilicatele. (NO 2TORS DELLIE	83 84 City Ites, the above-named cor authorized by the corpora lorida Statutes. 11: Heigstered Agent, signature required 13. 11: TITLE 1.1 TITLE 1.2 NAME 1.3 STREEL ADDRESS 1.4 CITY-SC-7P 2.1 THLE 2.2 NAME	poration submits this statement for the ation's board of directors. I hereby acc	B5 Zip Code Purpose of changing its registered ept the appointment as registered DATI ICERS AND DIRECTORS IN 12 Change Addition SUL174
OCA 1. Pursuant office or r agent. I a IGNATURE 2. IGNATURE 2. ILE WME REET ADDRESS IT-ST-2IP ILE WME REET ADDRESS	LA FL 32670 to the provisions of Sectio egistered agent, or both, im familiar with, and accep Signature, typed or printed name o OFF P HOUSER, R. L. 5731 S.W. 62ND PLAI OCALA FL S	ins 607.0502 and 6 in the State of Flori pl the obligations o freqistered agent and the FICERS AND DIRE (da Such change was 1, Section 607.0505, F Il emilicatele. (NO 2TORS DELLIE	83 84 City Ites, the above-named cor authorized by the corpora lorida Statutes. 11: Hergistered Agence signature required 13: 1.1 TILLÉ 1.2 NAME 1.3 STREEL ADDRESS 1.4 CITY-SCIP 2.1 TILLE	poration submits this statement for the ation's board of directors. I hereby acc	B5 Zip Code Purpose of changing its registered ept the appointment as registered DATI ICERS AND DIRECTORS IN 12 Change Addition SUL174
OCA 1. Pursuant office or r agent. I a IGNATURE 2. IGNATURE 2. IGNATURE 2. ILE WME REET ADDRESS TY-ST-ZIP TLE	to the provisions of Sectio egistered agent, or both, im familiar with, and accep Signature, typed or printed name o OFF P HOUSER, R. L. 5731 S.W. 62ND PLAI OCALA FL S HOUSER, MARGIE D 5731 SW 62 PL	ins 607.0502 and 6 in the State of Flori pl the obligations o freqistered agent and the FICERS AND DIRE (da Such change was 1, Section 607.0505, F Il emilicatele. (NO 2TORS DELLIE	83 84 City Ites, the above-named cor authorized by the corpora lorida Statutes. 11: Heigstered Agent signature required 13: 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-SC-7P 2.1 THLE 2.2 NAME 2.3 STREET ADDRESS	poration submits this statement for the ation's board of directors. I hereby acc	B5 Zip Code Purpose of changing its registered ept the appointment as registered DATI ICERS AND DIRECTORS IN 12 Change Addition SUL174
OCA 1. Pursuant office or r agent. I a IGNATURE 2. TLE WE REET ADDRESS TY-ST-ZIP TLE WE REET ADDRESS TY-ST-ZIP TLE WE WE	to the provisions of Sectio egistered agent, or both, im familiar with, and accep Signature, typed or printed name o OFF P HOUSER, R. L. 5731 S.W. 62ND PLAI OCALA FL S HOUSER, MARGIE D 5731 SW 62 PL	ins 607.0502 and 6 in the State of Flori pl the obligations o freqistered agent and the FICERS AND DIRE (da Such change was f, Section 607.0505, F If emplicable. (NO CTORS DELETE DELETE	83 84 City Ites, the above-named cor authorized by the corpora lorida Statutes. 11: Heigstered Agent Signature required 13: 11: Heigstered Agent Signature required 13: 11: Heigstered Agent Signature required 13: 13: 14: Heigstered Agent Signature required 13: 13: 14: Heigstered Agent Signature required 13: 14: Heigstered Agent Signature required 14: Heigstered Agent Signature required 14: Heigstered Agent Signature required 13: 14: Heigstered Agent Signature required 14: Heigstered Agent Signature Signature 14: Heigstered Agent Signature 14:	poration submits this statement for the ation's board of directors. I hereby acc	B5 Zip Code Purpose of changing its registered ept the appointment as registered DATI ICERS AND DIRECTORS IN 12 Change Addition 34474 Change Addition
OCA 1. Pursuant office or r agent. I a IGNATURE 2. TLE WE REET ADDRESS TY-ST-ZIP TLE WE REET ADDRESS TY-ST-ZIP TLE WE REET ADDRESS	to the provisions of Sectio egistered agent, or both, im familiar with, and accep Signature, typed or printed name o OFF P HOUSER, R. L. 5731 S.W. 62ND PLAI OCALA FL S HOUSER, MARGIE D 5731 SW 62 PL	ins 607.0502 and 6 in the State of Flori pl the obligations o freqistered agent and the FICERS AND DIRE (da Such change was f, Section 607.0505, F If emplicable. (NO CTORS DELETE DELETE	83 84 City Ites, the above-named cor authorized by the corpora lorida Statutos. 11: Heigstored Agent signature required 13: 13: 13: 14: City 13: 14: City 13: 14: THE 12: NAME 13: STREEL ADDRESS 14: City - 3(-7)P 21: THLE 22: NAME 23: STREEL ADDRESS 24: City - ST, 7)P 31: THLE	poration submits this statement for the ation's board of directors. I hereby acc	B5 Zip Code Purpose of changing its registered ept the appointment as registered DATI ICERS AND DIRECTORS IN 12 Change Addition 34474 Change Addition
OCA 1. Pursuant office or r agent. I a IGNATURE 2. ILE IGNATURE 2. TLE IREET ADDRESS TY-ST-ZIP TLE AME IREET ADDRESS TY-ST-ZIP	to the provisions of Sectio egistered agent, or both, im familiar with, and accep Signature, typed or printed name o OFF P HOUSER, R. L. 5731 S.W. 62ND PLAI OCALA FL S HOUSER, MARGIE D 5731 SW 62 PL	ins 607.0502 and 6 in the State of Flori pl the obligations o freqistered agent and the FICERS AND DIRE (da Such change was f, Section 607.0505, F If emplicable. (NO CTORS DELETE DELETE	83 84 City Ites, the above-named cor authorized by the corpora lorida Statutes. 11: Heigstered Agent Signature required 13: 12: NAME 13: STREEL ANDRESS 14: CITY - ST-ZIP 21: THLF 22: NAME 23: STREEL ANDRESS 24: CITY - ST-ZIP 31: THLE 32: NAME 33: STREEL ADDRESS	poration submits this statement for the ation's board of directors. I hereby acc	B5 Zip Code Purpose of changing its registered ept the appointment as registered DATI ICERS AND DIRECTORS IN 12 Change Addition 34474 Change Addition
OCA 1. Pursuant office or r agent. I a IGNATURE 2. IGNATURE 2. IGNATURE 1. I	to the provisions of Sectio egistered agent, or both, im familiar with, and accep Signature, typed or printed name o OFF P HOUSER, R. L. 5731 S.W. 62ND PLAI OCALA FL S HOUSER, MARGIE D 5731 SW 62 PL	ins 607.0502 and 6 in the State of Flori pl the obligations o freqistered agent and the FICERS AND DIRE (da Such change was (, Section 607.0505, F I emplicable (NG CTORS DELETE DELETE DELETE	83 84 City Ites, the above-named corrauthorized by the corporatorial Statutes. Iteratives 11 12 13 14 17 18 19 10 11 12 13 14 17 14 17 14 17 14 17 21 14 17 21 14 17 21 14 17 21 14 17 21 14 17 21 14 17 21 14 17 21 11 11 11 11 11 11 11 11 11 11 11 11 11 11 11 11 11 1	poration submits this statement for the ation's board of directors. I hereby acc	B5 Zip Code Purpose of changing its registered purpose of changing its registered DA1 DA1 ICERS AND DIRECTORS IN 12 Change Addition 34474 Change S4474 Change Addition Addition
OCA 1. Pursuant office or r agent. I a IGNATURE 2. IGNATURE 2. IGNATURE 2. IGNATURE 1. I	to the provisions of Sectio egistered agent, or both, im familiar with, and accep Signature, typed or printed name o OFF P HOUSER, R. L. 5731 S.W. 62ND PLAI OCALA FL S HOUSER, MARGIE D 5731 SW 62 PL	ins 607.0502 and 6 in the State of Flori pl the obligations o freqistered agent and the FICERS AND DIRE (da Such change was (, Section 607.0505, F I emplicable (NG CTORS DELETE DELETE DELETE	83 84 City Ites, the above-named corrauthorized by the corporatorial Statutes. It: Hogistored Agric signature required to the corporation of the corpo	poration submits this statement for the ation's board of directors. I hereby acc	B5 Zip Code Purpose of changing its registered purpose of changing its registered DA1 DA1 ICERS AND DIRECTORS IN 12 Change Addition 34474 Change S4474 Change Addition Addition
OCA 1. Pursuant office or r agent. I a IGNATURE 2. IGNATURE 2. IGNATURE 2. IGNATURE 1. I	to the provisions of Sectio egistered agent, or both, im familiar with, and accep Signature, typed or printed name o OFF P HOUSER, R. L. 5731 S.W. 62ND PLAI OCALA FL S HOUSER, MARGIE D 5731 SW 62 PL	ins 607.0502 and 6 in the State of Flori pl the obligations o freqistered agent and the FICERS AND DIRE (da Such change was (, Section 607.0505, F I emplicable (NG CTORS DELETE DELETE DELETE	83 84 City Ites, the above-named corrauthorized by the corporatorial Statutes. Iteratives 11 12 13 14 17 18 19 10 11 12 13 14 17 14 17 14 17 14 17 21 14 17 21 14 17 21 14 17 21 14 17 21 14 17 21 14 17 21 14 17 21 11 11 11 11 11 11 11 11 11 11 11 11 11 11 11 11 11 1	poration submits this statement for the ation's board of directors. I hereby acc	B5 Zip Code Purpose of changing its registered purpose of changing its registered DA1 DA1 ICERS AND DIRECTORS IN 12 Change Addition 34474 Change S4474 Change Addition Addition
OCA 1. Pursuant office or r agent. I a IGNATURE 2. IGNATURE 2. IGNATURE 2. IGNATURE 1. I	to the provisions of Sectio egistered agent, or both, im familiar with, and accep Signature, typed or printed name o OFF P HOUSER, R. L. 5731 S.W. 62ND PLAI OCALA FL S HOUSER, MARGIE D 5731 SW 62 PL	ins 607.0502 and 6 in the State of Flori pl the obligations o freqistered agent and the FICERS AND DIRE (da Such change was (, Section 607.0505, F If equivated CTORS DELETE DELETE DELETE	83 84 City Ites, the above-named cor- authorized by the corpora- lorida Statutes. 11: Hagistated Again Signature required 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 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME	poration submits this statement for the ation's board of directors. I hereby acc	B5 Zip Code Purpose of changing its registered change DATI ICERS AND DIRECTORS IN 12 Change Change SULT74 Change SULT74 Change Addition SULT74 Change Addition Change Addition
OCA 1. Pursuant office or r agent. I a IGNATURE 2. IREET ADDRESS TY-ST-ZIP TLE AME IREET ADDRESS TY-ST-ZIP TLE AME IREET ADDRESS TY-ST-ZIP TLE AME IREET ADDRESS TY-ST-ZIP TLE AME IREET ADDRESS TY-ST-ZIP TLE AME IREET ADDRESS TY-ST-ZIP TLE IREET ADDRESS TY-ST-ZIP	to the provisions of Sectio egistered agent, or both, im familiar with, and accep Signature, typed or printed name o OFF P HOUSER, R. L. 5731 S.W. 62ND PLAI OCALA FL S HOUSER, MARGIE D 5731 SW 62 PL	ins 607.0502 and 6 in the State of Flori pl the obligations o freqistered agent and the FICERS AND DIRE (da Such change was (, Section 607.0505, F If equivated CTORS DELETE DELETE DELETE	83 84 City Ites, the above-named cor authorized by the corpora lorida Statutes. 11: Hegistered Agent Signature required 13: 11: TITLE 12: NAME 13: STREELADDRESS 14: City - 2019 21: THUE 22: NAME 23: STREELADDRESS 24: City - 51-70P 31: THLE 32: NAME 33: STREELADDRESS 34: City - S1-70P 41: THLE 32: NAME 33: STREELADDRESS 34: City - S1-70P 41: THLE 42: NAME 33: STREELADDRESS 34: City - S1-70P 51: THEE 52: NAME 53: STREELADDRESS	poration submits this statement for the ation's board of directors. I hereby acc	B5 Zip Code Purpose of changing its registered change DATI ICERS AND DIRECTORS IN 12 Change Change SULT74 Change SULT74 Change Addition SULT74 Change Addition Change Addition
OCA 1. Pursuant office or r agent. I a IGNATURE 2. IGNATURE 2. IREET ADDRESS ITY-ST-ZIP TLE AME IREET ADDRESS ITY-ST-ZIP TLE AME IREET ADDRESS ITY-ST-ZIP ITLE AME IREET ADDRESS ITY-ST-ZIP ITLE AME IREET ADDRESS ITY-ST-ZIP ITLE AME IREET ADDRESS ITY-ST-ZIP ITLE AME IREET ADDRESS ITY-ST-ZIP	to the provisions of Sectio egistered agent, or both, im familiar with, and accep Signature, typed or printed name o OFF P HOUSER, R. L. 5731 S.W. 62ND PLAI OCALA FL S HOUSER, MARGIE D 5731 SW 62 PL	ins 607.0502 and 6 in the State of Flori pl the obligations o freqistered agent and the FICERS AND DIRE (da Such change was (, Section 607.0505, F If equivated CTORS DELETE DELETE DELETE	83 84 City Ites, the above-named cor- authorized by the corpora- lorida Statutes. 11: Hagistated Again Signature required 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 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME	poration submits this statement for the ation's board of directors. I hereby acc	B5 Zip Code Purpose of changing its registered changing its registered DATI ICERS AND DIRECTORS IN 12 Change Addition SULT74 Change SULT74 Change Addition SULT74 Change Addition Change Addition Change
OCA 1. Pursuant office or r agent. 1 a SIGNATURE 2. ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE AME	to the provisions of Sectio egistered agent, or both, im familiar with, and accep Signature, typed or printed name o OFF P HOUSER, R. L. 5731 S.W. 62ND PLAI OCALA FL S HOUSER, MARGIE D 5731 SW 62 PL	ins 607.0502 and 6 in the State of Flori pl the obligations o freqistered agent and the FICERS AND DIRE (da Such change was (, Section 607.0505, F II emplication 607.0505, F CTORS DELETE DELETE DELETE DELETE DELETE	83 84 City Ites, the above-named cor- authorized by the corpora- lorida Statutes. 11: Hegistered Agent signature requires 13: 1.1 TITLE 1.2 NAME 1.3 STREEL ADDRESS 1.4 CITY-SCIP 2.1 THLE 2.2 NAME 2.3 STREEL ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREEL ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREEL ADDRESS 3.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREEL ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREEL ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME	poration submits this statement for the ation's board of directors. I hereby acc	B5 Zip Code Purpose of changing its registored ept the appointment as registored DATI ICERS AND DIRECTORS IN 12 Change Addition 34474 Change 34474 Change Addition Change Addition Change Addition Change
OCA 1. Pursuant office or r agent. 1 a iIGNATURE 2. IILE AME TREET ADDRESS ITY-ST-ZIP ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE AME	to the provisions of Sectio egistered agent, or both, im familiar with, and accep Signature, typed or printed name o OFF P HOUSER, R. L. 5731 S.W. 62ND PLAI OCALA FL S HOUSER, MARGIE D 5731 SW 62 PL	ins 607.0502 and 6 in the State of Flori pl the obligations o freqistered agent and the FICERS AND DIRE (da Such change was (, Section 607.0505, F II emplication 607.0505, F CTORS DELETE DELETE DELETE DELETE DELETE	83 84 City Ites, the above-named cor authorized by the corpora lorida Statutes. 11: Hegistered Agent Signature requires 13: 1.1 TITLE 1.2 NAME 1.3 STREELADDRESS 1.4 CITY-ST-ZIP 2.1 THLE 2.2 NAME 2.3 STREELADDRESS 2.4 DITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREELADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREELADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREELADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME	poration submits this statement for the ation's board of directors. I hereby acc	B5 Zip Code Purpose of changing its registored ept the appointment as registored DATI ICERS AND DIRECTORS IN 12 Change Addition 34474 Change 34474 Change Addition Change Addition Change Addition Change