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I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information undicated 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 Larn an officier or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name	ACORESS ACORES	istered agent, or bo canaliar with, and ac incrementation protection MORGAN, ROGEF 331 SE 6TH AVE POMPANO BCH F OMPANO BCH F SD SRUMBAUGH, RK 1400A S.W. 29TH FORT LAUDERDA D SIBBS, ELLEN M 224 S.E. 9TH STF	Ith, in the State of Florie could the obligations of OFFICERS AND DIREC OFFICERS AND DIREC CHARD F TERRACE LE FL	Ia Such charge was Section 607.0505. F d applicately (NO CTORS DELETE DELETE DELETE DELETE DELETE	Ites, the above-named con authorized by the corpora iorida Statutes. TE: Registered Agent eigneture req. 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 6.3 STREET ADDRESS	ation's board of directors. I hereby accu		ng its registered