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PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K95617

(2)

FILED Mar 04 1998 8:00am Secretary of State

|  | GAGE SOURCE OF NAPLI  | ES, INC.                      |  |   |  |                       |                                    |  |
|--|---|-------------------------------|--|---|--|-----------------------|------------------------------------|--|
| Principal Pla  | ce of Business  | Mailing Address               |  |   |  | FOI BION BION D       | INI UUU UU                         | PRI GEBEL IN DI                        |
| 6304 TAMIAMI TR N 6304 TAMIAMI TR NAPLES FL 34108 NAPLES FL 34108  |   |                               |  |   |  |                       |                                    |  |
| US   |   | US                            |  |   | DO NOT WRIT  | E IN THIS S           | PACE                               |  |
|  |   |                               |  |   | 3. Date Incorporated or Qualified  |                       |                                    |  |
| 2. Principal   | Place of Business   | 2a. Mailing Addres            | 18   |   | 06/09/1989<br>4. FEI Number  |                       | - I IA                             | anting Co.                             |
| 21   |   | 26                            |  |   |  |                       | <del></del>                        | pplied For<br>lot Applicable           |
| Suite, Apt   | t.#, etc.   | Suite, Apt. #, e              | tc   | ;   | 65-0120755   |                       |                                    | Additional                             |
| 22   | •   | 27                            |  |   | 6. Certificate of Status Desired   |                       |                                    | leguired                               |
| City & Sta   | 110   | City & State                  |  |   | 6. Election Campaign Financing   |                       | \$5.00                             | May Be                                 |
| 23   |   | 28                            |  |   | Trust Fund Contribution  |                       |                                    | to Fees                                |
| — <sup>Zip</sup>   | Country   | Zip                           | Coun   | try   | 8. This corporation owes or has p  | aid the curr          |                                    |  |
| 24   | 25 9. Name and Address of Curr  | 29                            | 30   |   | Personal Property Tax due Jun  |                       |                                    | □ No                                   |
|  |   | rent Hegistered Agent         |  | 1 Name  | 10. Name and Address of New R  | egistered A           | gent                               |  |
|  | OLTON, DIANNA L   |                               | ["   | I IVANIE .  |  |                       |                                    | į                                      |
| 6304 TAMIAMI TR N  |   |                               | •  | Street Add  | dress (P.O. Box Number is Not Accepta  | ble)                  |                                    |  |
| N  | APLES FL 33940  |                               | <u> </u>   | 33  |  | ····                  |                                    |  |
|  |   |                               | Ľ  |   | ·  |                       |                                    |  |
|  |   |                               | [4   | City  |  | FL                    | 85 Zip                             | Code                                   |
| 11. Pursuani   | to the provisions of Sections 607.0   | 502 and 607.1508, Florida     | Statutes, the abo  | ove-named co  | rporation submits this statement for the   |                       | changing i                         | its registered                         |
| office or  | registered agent, or both, in the Sta   | ate of Florida, Such change   | was authorized   | by the corpora  | rporation submits this statement for the ation's board of directors. I hereby acce               | pt the appo           | intment as                         | registered                             |
|  |   | ilganona or, occiton ocr.oc   | oo, Florida Siaid  | 105.  |  |                       |                                    |  |
| SIGNATURE  | Signature, typed or printed name of registered  | agent and title if applicable | (NOTE: Registered  | Agent signature req   | uired when reinstating)  | DATE                  |                                    |  |
| 12.  | OFFICERS A  | ND DIRECTORS                  |  |   |  |                       |                                    |  |
| TITLE  |   |                               | 13.  |   | ADDITIONS/CHANGES TO OFFI  | CERS AND              | DIRECTO                            | RS IN 12                               |
|  | PD  | DELE                          |  | E   | ADDITIONS/CHANGES TO OFFI  | CERS AND              | DIRECTOI<br>Change                 | RS IN 12                               |
| NAME   | BOLTON, DIANNA  |                               |  |   | ADDITIONS/CHANGES TO OFFI  | CERS AND              | _                                  |  |
| NAME<br>STREET ADDRESS   | BOLTON, DIANNA<br>6304 TAMIAMI TR N   |                               | TE 1.1 TITL<br>1.2 NAM   |   | ADDITIONS/CHANGES TO OFFI  | CERS AND [            | _                                  |  |
| STREET ADDRESS<br>CITY-ST-ZIP  | BOLTON, DIANNA<br>6304 TAMIAMI TR N<br>NAPLES FL  | ☐ DELE                        | TE 1.1 TITL 1.2 NAM 1.3 STRI 1.4 CITY  | IE<br>EET ADDRESS<br>'-ST-ZIP   |  |                       | Change                             | Addition                               |
| STREET ADDRESS<br>CITY-ST-ZIP<br>TITLE   | BOLTON, DIANNA<br>6304 TAMIAMI TR N<br>NAPLES FL  | DELE                          | TE 1.1 TITL 1.2 NAM 1.3 STRI 1.4 CITS TE 2.1 TITL  | EET ADDRESS<br>(-ST-ZIP   | DIRECTOR   |                       | _                                  |  |
| STREET ADDRESS<br>CITY-ST-ZIP<br>TITLE<br>NAME   | BOLTON, DIANNA 6304 TAMIAMI TR N NAPLES FL DIRECTOR RICHARD F. CAR                                | DELE OFTE                     | TE 1.1 TITL 1.2 NAA 1.3 STRI 1.4 CIT TE 2.1 TITL 2.2 NAA   | EET ADDRESS<br>/-ST-ZIP<br>E  | DIRECTOR F. CORNE  | ·£                    | Change                             | Addition                               |
| STREET ADDRESS<br>CITY-ST-ZIP<br>TITLE<br>NAME<br>STREET ADDRESS   | BOLTON, DIANNA 6304 TAMIAMI TR N NAPLES FL DIRECTOR RICHARD F. COR GROWN FAMILIAMI                | DELE OFTE TR. N.              | TE 1.1 TITL 1.2 NAM 1.3 STRI 1.4 CITY TE 2.1 TITL 2.2 NAM 2.3 STRI   | EET ADDRESS  (-ST-ZIP  E  EET ADDRESS   | DIRECTOR  RICHARD F. CORNE  GBOY TAMIAMI TR  | E                     | Change                             | Addition                               |
| STREET ADDRESS<br>CITY-ST-ZIP<br>TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | BOLTON, DIANNA 6304 TAMIAMI TR N NAPLES FL DIRECTOR RICHARD F. CAR                                | DELE DELE DELE TR. N.         | TE 1.1 TITL 1.2 NAM 1.3 STRI 1.4 CITY TE 2.1 TITL 2.2 NAM 2.3 STRI 2.4 CITY  | EET ADDRESS (-ST-ZIP E EET ADDRESS Y-ST-ZIP   | DIRECTOR RICHARD F. CORAC GBOY TAMIAMI TR NAPUES, FL. BYIC                                       | ,εξ<br>,, λί,<br>, Σξ | Change Change                      | Addition                               |
| STREET ADDRESS<br>CITY-ST-ZIP<br>TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP<br>TITLE   | BOLTON, DIANNA 6304 TAMIAMI TR N NAPLES FL DIRECTOR RICHARD F. COR GROWN FAMILIAMI                | DELE OFTE TR. N.              | TE 1.1 TITL 1.2 NAM 1.3 STR 1.4 CITY TE 2.1 TITL 2.2 NAM 2.3 STR 2.4 CIT TE 3.1 TITL   | HE EET ADDRESS (-ST-ZIP E HE EET ADDRESS Y-ST-ZIP E T T T T T T T T T T T T T T T T T T   | DIRECTOR RICHARD F. CORNE GBOY TAMIAMI TR NAPUES, FL. BYIC DIRECTOR                              | 78.<br>('vi'          | Change                             | Addition                               |
| STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME  | BOLTON, DIANNA 6304 TAMIAMI TR N NAPLES FL DIRECTOR RICHARD F. COR GROWN FAMILIAMI                | DELE DELE DELE TR. N.         | TE 1.1 TITL 1.2 NAM 1.3 STRI 1.4 CITY TE 2.1 TITL 2.2 NAM 2.3 STRI 2.4 CIT TE 3.1 TITL 3.2 NAM   | RE EET ADDRESS (-ST-ZIP E EET ADDRESS Y-ST-ZIP E 1  | DIRECTOR RICHARD F. CORNE GBOY TAMIAMI TR NAPUES, FL. BYIC DIRECTOR GERALD F. GRIPF              | Æ (, N, )             | Change Change                      | Addition                               |
| STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS   | BOLTON, DIANNA 6304 TAMIAMI TR N NAPLES FL DIRECTOR RICHARD F. COR GROWN FAMILIAMI                | DELE DELE DELE TR. N.         | TE 1.1 TITL 1.2 NAM 1.3 STRI 1.4 CITY TE 2.1 TITL 2.2 NAM 2.3 STRI 2.4 CIT TE 3.1 TITL 3.2 NAM 3.3 STRI  | RE EET ADDRESS (-ST-ZIP E EET ADDRESS Y-ST-ZIP E EET ADDRESS IE EET ADDRESS   | DIRECTOR RICHARD F. CORAC GBOY TAMIAMI TR NAPUES, FL. BYIC DIRECTOR GERALD F. GRIFF G304 TAMIAMI | E IN II'              | Change Change                      | Addition                               |
| STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME  | BOLTON, DIANNA 6304 TAMIAMI TR N NAPLES FL DIRECTOR RICHARD F. COR GROWN FAMILIAMI                | DELE DELE DELE TR. N.         | TE 1.1 TITL 1.2 NAM 1.3 STRI 1.4 CITY TE 2.1 TITL 2.2 NAM 2.3 STRI 2.4 CIT TE 3.1 TITL 3.2 NAM 3.3 STRI 3.4 CITY 3.4 CITY  | RE EET ADDRESS (-ST-ZIP E EET ADDRESS Y-ST-ZIP E IE EET ADDRESS Y-ST-ZIP E EET ADDRESS Y-ST-ZIP   | DIRECTOR RICHARD F. CORNE GBOY TAMIAMI TR NAPUES, FL. BYIC DIRECTOR GERALD F. GRIPF              | E                     | Change Change                      | Addition  Addition                     |
| STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP   | BOLTON, DIANNA 6304 TAMIAMI TR N NAPLES FL DIRECTOR RICHARD F. COR GROWN FAMILIAMI                | DELE  OFFICE  TR. N.  DELE    | TE 1.1 TITL 1.2 NAM 1.3 STRI 1.4 CITY TE 2.1 TITL 2.2 NAM 2.3 STRI 2.4 CIT TE 3.1 TITL 3.2 NAM 3.3 STRI 3.4. CITY  | RE  SET ADDRESS  (-ST-ZIP  E  SET ADDRESS  Y-ST-ZIP  E  III  III  III  III  III  III  II  | DIRECTOR RICHARD F. CORAC GBOY TAMIAMI TR NAPUES, FL. BYIC DIRECTOR GERALD F. GRIFF G304 TAMIAMI | E                     | Change Change                      | Addition                               |
| STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE THE STREET ADDRESS CITY-ST-ZIP TITLE  | BOLTON, DIANNA 6304 TAMIAMI TR N NAPLES FL DIRECTOR RICHARD F. COR GROWN FAMILIAMI                | DELE  OFFICE  TR. N.  DELE    | TE 1.1 TITL 1.2 NAM 1.3 STRI 1.4 CITY TE 2.1 TITL 2.2 NAM 2.3 STRI 2. 4 CIT TE 3.1 TITL 3.2 NAM 3.3 STRI 3.4 CIT' TE 4.1 TITL 4.2 NAM  | RE  SET ADDRESS  (-ST-ZIP  E  SET ADDRESS  Y-ST-ZIP  E  III  III  III  III  III  III  II  | DIRECTOR RICHARD F. CORAC GBOY TAMIAMI TR NAPUES, FL. BYIC DIRECTOR GERALD F. GRIFF G304 TAMIAMI | E                     | Change Change                      | Addition  Addition                     |
| STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS   | BOLTON, DIANNA 6304 TAMIAMI TR N NAPLES FL DIRECTOR RICHARD F. COR GROWN FAMILIAMI                | DELE  OFFICE  TR. N.  DELE    | TE 1.1 TITL 1.2 NAM 1.3 STRI 1.4 CITY TE 2.1 TITL 2.2 NAM 2.3 STRI 2. 4 CIT TE 3.1 TITL 3.2 NAM 3.3 STRI 3.4 CITY TE 4.1 TITL 4.2 NAM 4.3 STRI 4.3  | RE EET ADDRESS ('-ST-ZIP EET ADDRESS Y-ST-ZIP EET ADDRESS ('-ST-ZIP EET ADDRESS ('-ST-ZIP EATE ADDRESS EET ADDRESS  | DIRECTOR RICHARD F. CORAC GBOY TAMIAMI TR NAPUES, FL. BYIC DIRECTOR GERALD F. GRIFF G304 TAMIAMI | E                     | Change Change                      | Addition  Addition                     |
| STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE NAME NAME  | BOLTON, DIANNA 6304 TAMIAMI TR N NAPLES FL DIRECTOR RICHARD F. COR GROWN FAMILIAMI                | DELE  OFFICE  TR. N.  DELE    | TE 1.1 TITL 1.2 NAM 1.3 STRI 1.4 CITY TE 2.1 TITL 2.2 NAM 2.3 STRI 2.4 CIT TE 3.1 TITL 3.2 NAM 3.3 STRI 3.4 CIT' TE 4.1 TITL 4.2 NAM 4.3 STRI 4.4 CITY 4.4 CITY  | RE  SET ADDRESS  (-ST-ZIP  E  BE  SET ADDRESS  Y-ST-ZIP  E  SET ADDRESS (-ST-ZIP  E  AE  SET ADDRESS  -ST-ZIP   | DIRECTOR RICHARD F. CORAC GBOY TAMIAMI TR NAPUES, FL. BYIC DIRECTOR GERALD F. GRIFF G304 TAMIAMI | E                     | Change Change                      | Addition  Addition                     |
| STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP   | BOLTON, DIANNA 6304 TAMIAMI TR N NAPLES FL DIRECTOR RICHARD F. COR GROWN FAMILIAMI                | DELE  DELE                    | TE 1.1 TITL 1.2 NAM 1.3 STRI 1.4 CITY TE 2.1 TITL 2.2 NAM 2.3 STRI 2. 4 CIT TE 3.1 TITL 3.2 NAM 3.3 STRI 3.4 CIT' TE 4.1 TITL 4.2 NAM 4.3 STRI 4.4 CITY  | RE  EET ADDRESS  (-ST-ZIP  E  EET ADDRESS  Y-ST-ZIP  E  EET ADDRESS (-ST-ZIP  E  AE  EET ADDRESS  -ST-ZIP  E  AE  EET ADDRESS   | DIRECTOR RICHARD F. CORAC GBOY TAMIAMI TR NAPUES, FL. BYIC DIRECTOR GERALD F. GRIFF G304 TAMIAMI | E                     | Change Change Change               | Addition  Addition  Addition           |
| STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE   | BOLTON, DIANNA 6304 TAMIAMI TR N NAPLES FL DIRECTOR RICHARD F. COR GROWN FAMILIAMI                | DELE  DELE                    | TE 1.1 TITL 1.2 NAM 1.3 STRI 1.4 CITY TE 2.1 TITL 2.2 NAM 2.3 STRI 2. 4 CITY TE 3.1 TITL 3.2 NAM 3.3 STRI 3.4 CITY TE 4.1 TITL 4.2 NAM 4.3 STRI 4.4 CITY TE 5.1 TITTL 5.2 NAM  | RE  EET ADDRESS  (-ST-ZIP  E  EET ADDRESS  Y-ST-ZIP  E  EET ADDRESS (-ST-ZIP  E  AE  EET ADDRESS  -ST-ZIP  E  AE  EET ADDRESS   | DIRECTOR RICHARD F. CORAC GBOY TAMIAMI TR NAPUES, FL. BYIC DIRECTOR GERALD F. GRIFF G304 TAMIAMI | E                     | Change Change Change               | Addition  Addition  Addition           |
| STREET ADDRESS CITY-ST-ZIP TITLE NAME  | BOLTON, DIANNA 6304 TAMIAMI TR N NAPLES FL DIRECTOR RICHARD F. COR GROWN FAMILIAMI                | DELE  DELE                    | TE 1.1 TITL 1.2 NAM 1.3 STRI 1.4 CITY 1.2 NAM 2.3 STRI 2.4 CITY 1.5 NAM 3.3 STRI 3.4 CITY 1.5 NAM 4.3 STRI 4.2 NAM 4.3 STRI 4.2 NAM 5.3 STRI 5.2 NAM 5.3 STRI 5.2 NAM 6.3 STRI 6.5 NAM 6.5 STRI 6.5 NAM 6.5 STRI 6 | RE  EET ADDRESS  (-ST-ZIP  E  EET ADDRESS  Y-ST-ZIP  E  EET ADDRESS (-ST-ZIP  E  AE  EET ADDRESS  -ST-ZIP  E  AE  EET ADDRESS   | DIRECTOR RICHARD F. CORAC GBOY TAMIAMI TR NAPUES, FL. BYIC DIRECTOR GERALD F. GRIFF G304 TAMIAMI | E                     | Change Change Change               | Addition  Addition  Addition           |
| STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS   | BOLTON, DIANNA 6304 TAMIAMI TR N NAPLES FL DIRECTOR RICHARD F. COR GROWN FAMILIAMI                | DELE  DELE                    | TE 1.1 TITL 1.2 NAM 1.3 STRI 1.4 CITY TE 2.1 TITL 2.2 NAM 2.3 STRI 2. 4 CITY TE 3.1 TITL 3.2 NAM 3.3 STRI 3.4 CITY TE 4.1 TITL 4.2 NAM 4.3 STRI 4.4 CITY TE 5.1 TITU 5.2 NAM 5.3 STRI 5.4 CITY 5.5 STRI 5.4 CITY 5.5 STRI 5.4 CITY 5.7 NAM 5.3 STRI 5.4 CITY 5.4 CITY 5.7 NAM 5.3 STRI 5.4 CITY 5.4 CITY 5.5 NAM 5.3 STRI 5.4 CITY 5.4 CITY   | RE RET ADDRESS (-ST-ZIP)  | DIRECTOR RICHARD F. CORAC GBOY TAMIAMI TR NAPUES, FL. BYIC DIRECTOR GERALD F. GRIFF G304 TAMIAMI | E                     | Change Change Change               | Addition  Addition  Addition           |
| STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP   | BOLTON, DIANNA 6304 TAMIAMI TR N NAPLES FL DIRECTOR RICHARD F. COR GROWN FAMILIAMI                | DELE  DELE  DELE              | TE 1.1 TITL 1.2 NAM 1.3 STRI 1.4 CITN TE 2.1 TITL 2.2 NAM 2.3 STRI 2. 4 CIT TE 3.1 TITL 3.2 NAM 3.3 STRI 3.4 CIT TE 4.1 TITL 4.2 NAM 4.3 STRI 4.4 CITY TE 5.1 TITL 5.2 NAM 5.3 STRI 5.4 CITY TE 5.4 CITY   | RE RET ADDRESS ('-ST-ZIP) E RET ADDRESS (-ST-ZIP) E RET ADDRESS (-ST-ZIP) E RET ADDRESS (-ST-ZIP) E RET ADDRESS (-ST-ZIP) E   | DIRECTOR RICHARD F. CORAC GBOY TAMIAMI TR NAPUES, FL. BYIC DIRECTOR GERALD F. GRIFF G304 TAMIAMI | E                     | Change Change Change Change        | Addition  Addition  Addition           |
| STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE   | BOLTON, DIANNA 6304 TAMIAMI TR N NAPLES FL DIRECTOR RICHARD F. COR GROWN FAMILIAMI                | DELE  DELE  DELE              | TE 1.1 TITL 1.2 NAM 1.3 STRI 1.4 CITY 1.2 NAM 2.3 STRI 2.4 CITY 1.5 NAM 3.3 STRI 3.4 CITY 1.5 NAM 4.3 STRI 4.1 TITL 4.2 NAM 4.3 STRI 4.4 CITY 1.5 NAM 5.3 STRI 5.4 CITY 1.6 NAM 5.3 STRI 5.4 CITY 1.6 NAM 5.4 CITY 1.7 NAM 5.3 STRI 5.4 CITY 1.7 NAM 5.4 C | RE RET ADDRESS ('-ST-ZIP) E RET ADDRESS (-ST-ZIP) E RET ADDRESS (-ST-ZIP) E RET ADDRESS (-ST-ZIP) E RET ADDRESS (-ST-ZIP) E   | DIRECTOR RICHARD F. CORAC GBOY TAMIAMI TR NAPUES, FL. BYIC DIRECTOR GERALD F. GRIFF G304 TAMIAMI | E                     | Change Change Change Change        | Addition  Addition  Addition           |
| STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | BOLTON, DIANNA 6304 TAMIAMI TR N NAPLES FL  DIRECTOR RICHARD F. COR GROW FAMILAMI MAPLES, PL. 341 | DELE  DELE  DELE              | TE 1.1 TITL 1.2 NAM 1.3 STRI 1.4 CITY TE 2.1 TITL 2.2 NAM 2.3 STRI 2.4 CITY TE 3.1 TITL 3.2 NAM 3.3 STRI 3.4 CITY TE 4.1 TITL 4.2 NAM 4.3 STRI 5.2 NAM 5.3 STRI 5.4 CITY TE 5.1 TITL 5.2 NAM 5.3 STRI 5.4 CITY TE 6.1 TITL 6.2 NAM 6.3 STRI 6.4 CITY   | RE  RET ADDRESS  (-ST-ZIP  RE  RET ADDRESS  (-ST-ZIP  RE  RET ADDRESS  (-ST-ZIP  RE  RET ADDRESS  -ST-ZIP  RE  RET ADDRESS  -ST-ZIP | DIRECTOR RICHARD F. CORAC GBOY TAMIAMI TR NAPUES, FL. BYIC DIRECTOR GERALD F. GRIFF G304 TAMIAMI | E IN IT               | Change Change Change Change Change | Addition  Addition  Addition  Addition |

14. I 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 indicated 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; that I am an officer 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 appears in Block 13 if chapter in the receiver of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter in the receiver of the corporation or the receiver of the corporation of the corporation or the receiver of the corporation or the receiver of the corporation of the corporation or the receiver of the corporation or the receiver of the corporation of the corporation or the receiver of the receiver of the corporation or the receiver of th

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1/AN/15/87 941-514-200