

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

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19. *Urtica dioica* L.



1995

DOCUMENT # L42897

（三）在《中華人民共和國憲法》第 13 條規定：

APPROVED
AND
FILED

CHART - I

GEORGE L. GAYE
TALLAHASSEE, FLORIDA

(3)

DONNA HUMPHREY, INC.

DONNA L. HUMPHREY
4020 SHOAL LINE BLVD.
HERNANDO BCH FL 34207
US

DONNA L HUMPHREY
4080 SHOAL LINE BLVD
HERNANDO BCH FL 34607
US

REFERENCES AND NOTES

2. Recipient's Name	28. Mailing Address	12/29/1993	03/01/1994
21 9691 W. FORT ISLAND TRAIL Suite A-100	26 9691 W. FORT ISLAND TRAIL Suite A-100	4. FEE Number 59-2982694	5. Applied For Not Applicable
22	27	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23 CRYSTAL RIVER, FLORIDA	28 CRYSTAL RIVER, FLORIDA	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
		7. This application is not valid for amounts less than \$1.00 D.C.	

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HUMPHREY, DONNA L.
3340 HORSESHOE LANE
SPRING HILL, FL 34606

1. Name and Address of New Registered Agent				
B1	Name			
B2	Street Address. P.O. Box Number is Not Acceptable 9691 W. FORT ISLAND TRAIL			
B3				
B4	City Orlando	FL	BS	Zip Code 32837

14. Pursuant to the provisions of law from the State of New York, the above-named corporation submits this statement for the purpose of changing its registered office and name, and for the State of New York to accept it as the principal place of business of the corporation. I further request the appointment of a registered agent for the corporation.

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14. acknowledge orally that the information supplied will thereafter be voluntarily furnished and done, and orally for the exemption stated in Section 13(b)(1)(G), Florida Statutes, that the information supplied or this amount of oral supplemental information requested is equivalent to the substance shall have the same legal effect as if made under oath, shall have the effect of an affidavit, and the importance of the records or further compensated to receive the report as required by Chapter 972, Florida Statutes, and that no further compensation will be paid for the report as required by Chapter 972, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF BORROWING OFFICER OR DIRECTOR

APRIL 30, 1995 904-564-4247

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