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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Socretary of State
DIVISION OF CORPORATIONS

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|                                                                                                                                                                                                                                                                                                                                       | MENT #<br>n Name<br>L SALES E                          | # <b>L54</b> 4<br>ENTERPRISES,                                                                                         |                                                                        | (9                                                              | 9)                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                      | <br>                                                         | 811)   <b>8</b> 1611   <b>8</b> 1617 <b>8</b> 1 | 6/8/ 110/ 212H BIZH BIZ                     | IF ANDER BLADE DEBLE HAGE             |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|-----------------------------------------------------------------|------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|--------------------------------------------------------------|-------------------------------------------------|---------------------------------------------|---------------------------------------|
| Principal Place                                                                                                                                                                                                                                                                                                                       | of Business                                            |                                                                                                                        |                                                                        | Jailing Address                                                 |                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                      |                                                              |                                                 |                                             |                                       |
| Principal Place of Business  * JOSEPH L. STOVER  4310 MCCORVEY RD.  DELAND FL 32724                                                                                                                                                                                                                                                   |                                                        | IVI                                                                                                                    | Mailing Address  ** JOSEPH L. STOVER 4310 MCCORVEY RD. DELAND FL 32724 |                                                                 |                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                      |                                                              |                                                 |                                             |                                       |
|                                                                                                                                                                                                                                                                                                                                       |                                                        |                                                                                                                        |                                                                        |                                                                 |                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                      | 3. Date Incorporated 01/19/199                               |                                                 | 3a. Date of Las                             | t Report<br>5/1995                    |
|                                                                                                                                                                                                                                                                                                                                       | ace of Business                                        | 3                                                                                                                      | 2a.                                                                    | . Mailing Address                                               |                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                      | 4. FEI Number                                                |                                                 | ) 04/00                                     | Applied For                           |
| 21 Suito Anti-                                                                                                                                                                                                                                                                                                                        | h ata                                                  |                                                                                                                        | 26                                                                     |                                                                 |                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                      | 59-2989                                                      | 263                                             | _                                           | Not Applicable                        |
| Suite, Apt. :                                                                                                                                                                                                                                                                                                                         |                                                        |                                                                                                                        | 27                                                                     | Suite, Apt. #, etc                                              | C.                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                      | 5. Certificate of State                                      | us Desired                                      | 1 1                                         | 75 Additional<br>se Required          |
| City & State                                                                                                                                                                                                                                                                                                                          | •                                                      |                                                                                                                        | 28                                                                     | City & State                                                    |                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                      | 6. Election Campaig Trust Fund Contri                        |                                                 | □ \$5                                       | .00 May Be                            |
| Zφ                                                                                                                                                                                                                                                                                                                                    |                                                        | Country                                                                                                                |                                                                        | Zip                                                             |                                    | Country                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <del> </del>                                                         | 8. This corporation t                                        |                                                 |                                             | ded to Fees                           |
| 24                                                                                                                                                                                                                                                                                                                                    | 25                                                     | d Address of Curr                                                                                                      | 29                                                                     |                                                                 | 30                                 | 1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                      | Florida Statutes                                             | ☐ Yes                                           | □ No                                        | 0 100.002,                            |
|                                                                                                                                                                                                                                                                                                                                       | 9, Name ar                                             | io Address of Curr                                                                                                     | ent Regis                                                              | tered Agent                                                     |                                    | 81                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Name                                                                 | 10. Name and Addr                                            | ess of New R                                    | egistered Agent                             |                                       |
| STOVE                                                                                                                                                                                                                                                                                                                                 | ER, JOSEPH                                             | r                                                                                                                      |                                                                        |                                                                 |                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                      |                                                              |                                                 |                                             |                                       |
|                                                                                                                                                                                                                                                                                                                                       | MCCORVEY I                                             |                                                                                                                        |                                                                        |                                                                 |                                    | 82                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Street Add                                                           | dress (P.O. Box Number is                                    | Not Acceptable                                  | le)                                         |                                       |
|                                                                                                                                                                                                                                                                                                                                       | ID FL 32724                                            | -                                                                                                                      |                                                                        |                                                                 |                                    | 83                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                      |                                                              |                                                 |                                             |                                       |
|                                                                                                                                                                                                                                                                                                                                       |                                                        |                                                                                                                        |                                                                        |                                                                 |                                    | 84                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | City                                                                 |                                                              |                                                 |                                             |                                       |
|                                                                                                                                                                                                                                                                                                                                       |                                                        |                                                                                                                        |                                                                        |                                                                 |                                    | 64                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | City                                                                 |                                                              |                                                 |                                             | Zip Code                              |
| 44 D                                                                                                                                                                                                                                                                                                                                  | - 11                                                   | 75                                                                                                                     |                                                                        | ·                                                               |                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                      |                                                              |                                                 |                                             |                                       |
| 11. Pursuant to<br>or registere<br>familiar with                                                                                                                                                                                                                                                                                      | o the provisions<br>ed agent, or bo<br>h, and accept t | of Sections 607,05<br>th, in the State of Flo<br>he obligations of, Se                                                 | 02 and 607<br>orida. Such<br>ection 607.0                              | 7.1508, Florida St.<br>I change was auth<br>0505, Florida Stati | atutes, th<br>norized by<br>lutes. | e above-r<br>the corpo                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | amed corporation's box                                               | pration submits this statem<br>and of directors. I hereby ac | ent for the purpocept the appo                  | pose of changing it<br>pintment as register | s registered office<br>ed agent. I am |
| SIGNATURE _                                                                                                                                                                                                                                                                                                                           | ·                                                      | • 1,11                                                                                                                 |                                                                        |                                                                 | .0.03.                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                      |                                                              | ent for the purpocept the appo                  | pose of changing it<br>intraent as register | s registered office<br>ed agent. I am |
| SIGNATURE _                                                                                                                                                                                                                                                                                                                           |                                                        | of Sections 607.05s<br>th, in the State of Fic<br>the obligations of, Se<br>inted name of registered age<br>OFFICERS A | ant and title it a                                                     | appicable                                                       | .0.03.                             | gistered Agen                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                      | red when reinstating)                                        |                                                 | DATE                                        |                                       |
| SIGNATURE _                                                                                                                                                                                                                                                                                                                           | Signature, typed or p                                  | inted name of registered age<br>OFFICERS A                                                                             | ant and title it a                                                     | appicable                                                       | .0.03.                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                      | red when reinstating)                                        |                                                 | DATE<br>CERS AND DIREC                      | TORS IN 12                            |
| SIGNATURE - 12. TITLE NAME                                                                                                                                                                                                                                                                                                            | Signature, typed or p PSTD LAGUE,                      | OFFICERS A                                                                                                             | ant and title it a                                                     | inpicable                                                       | .0.03.                             | gislered Agen                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                      | red when reinstating)                                        |                                                 | DATE                                        | TORS IN 12                            |
| SIGNATURE                                                                                                                                                                                                                                                                                                                             | PSTD<br>LAGUE,<br>1756 HC                              | OFFICERS A  LESTER DWLAND BLVD                                                                                         | ant and title it a                                                     | inpicable                                                       | .0.03.                             | gistered Agen  13. 1.1 THLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | i signature requir                                                   | red when reinstating)                                        |                                                 | DATE<br>CERS AND DIREC                      | TORS IN 12                            |
| SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP                                                                                                                                                                                                                                                                                 | Signature, typed or p PSTD LAGUE,                      | OFFICERS A  LESTER DWLAND BLVD                                                                                         | ant and title it a                                                     | nopicatulu<br>TORS                                              | .0.03.                             | 13. 1.1 TITLE 1.2 NAME 1.3 STREET. 1.4 CITY-S                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | I signature requir                                                   | red when reinstating)                                        |                                                 | DATE<br>CERS AND DIREC                      | TORS IN 12                            |
| SIGNATURE  12. TILLE NAME SIREET ADDRESS CITY-ST-ZIP TITLE                                                                                                                                                                                                                                                                            | PSTD<br>LAGUE,<br>1756 HC                              | OFFICERS A  LESTER DWLAND BLVD                                                                                         | ant and title it a                                                     | inpicable                                                       | .0.03.                             | 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-ST                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | I signature requir                                                   | red when reinstating)                                        |                                                 | DATE<br>CERS AND DIREC                      | TORS IN 12<br>E Addition              |
| SIGNATURE  12. TILE NAME SIREET ADDRESS CITY-ST-ZIP                                                                                                                                                                                                                                                                                   | PSTD<br>LAGUE,<br>1756 HC                              | OFFICERS A  LESTER DWLAND BLVD                                                                                         | ant and title it a                                                     | nopicatulu<br>TORS                                              | .0.03.                             | 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | ADDRESS                                                              | red when reinstating)                                        |                                                 | DATE  CERS AND DIREC  Chang                 | TORS IN 12<br>E Addition              |
| SIGNATURE  12. TILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME                                                                                                                                                                                                                                                                        | PSTD<br>LAGUE,<br>1756 HC                              | OFFICERS A  LESTER DWLAND BLVD                                                                                         | ant and title it a                                                     | nopicatulu<br>TORS                                              | .0.03.                             | 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 GITY-S 2.1 TITLE 2.2 NAME 2.3 STREET                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | ADDRESS ADDRESS                                                      | red when reinstating)                                        |                                                 | DATE  CERS AND DIREC  Chang                 | TORS IN 12<br>E Addition              |
| SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS                                                                                                                                                                                                                                                        | PSTD<br>LAGUE,<br>1756 HC                              | OFFICERS A  LESTER DWLAND BLVD                                                                                         | ant and title it a                                                     | nopicatulu<br>TORS                                              | (NOTE Pro                          | 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | ADDRESS ADDRESS                                                      | red when reinstating)                                        |                                                 | DATE  CERS AND DIREC  Chang                 | TORS IN 12 e                          |
| SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  CITY-ST-ZIP                                                                                                                                                                                                                       | PSTD<br>LAGUE,<br>1756 HC                              | OFFICERS A  LESTER DWLAND BLVD                                                                                         | ant and title it a                                                     | DELETE                                                          | (NOTE Pro                          | gsterod Agen  13. 1.1 TiTLE 1.2 NAME 1.3 STREET 1.4 CITY-ST 2.1 TITLE 2.3 STREET 2.4 CITY-ST                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | ADDRESS ADDRESS                                                      | red when reinstating)                                        |                                                 | DATE  CERS AND DIREC  Chang                 | TORS IN 12 e                          |
| SIGNATURE  12. THE NAME STREET ADDRESS CITY-SI-ZIP THE NAME STREET ADDRESS CITY-SI-ZIP THE                                                                                                                                                                                                                                            | PSTD<br>LAGUE,<br>1756 HC                              | OFFICERS A  LESTER DWLAND BLVD                                                                                         | ant and title it a                                                     | DELETE                                                          | (NOTE Pro                          | 13. 1.1 TITLE 1.2 NAME 1.3 STREE1 1.4 CITY-S 2 1 TITLE 2.2 NAME 2.3 STREE1 2.4 CITY-S 3.1 TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | ADDRESS - ZIP ADDRESS - ZIP                                          | red when reinstating)                                        |                                                 | DATE  CERS AND DIREC  Chang                 | TORS IN 12 e                          |
| SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-S1-ZIP  TITLE  NAME  STREET ADDRESS  CITY-S1-ZIP  TITLE  NAME  STREET ADDRESS  CITY-S1-ZIP                                                                                                                                                | PSTD<br>LAGUE,<br>1756 HC                              | OFFICERS A  LESTER DWLAND BLVD                                                                                         | ant and title it a                                                     | DELETE                                                          | (NOTE Req                          | 13. 1.1 TITLE 1.2 NAME 1.3 STREE1 1.4 CITY-S 2 1 TITLE 2.2 NAME 2.3 STREE1 2.4 CITY-S 3.1 TITLE 3.2 NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | ADDRESS - ZIP - ADDRESS - ADDRESS - ADDRESS                          | red when reinstating)                                        |                                                 | DATE  CERS AND DIREC  Chang                 | TORS IN 12 e                          |
| SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-S1- ZIP  TITLE  NAME  STREET ADDRESS  CITY-S1- ZIP  TITLE  NAME  TITLE  TITLE  TITLE  TITLE  TITLE  TITLE  TITLE  TITLE  TITLE                                                                                                            | PSTD<br>LAGUE,<br>1756 HC                              | OFFICERS A  LESTER DWLAND BLVD                                                                                         | ant and title it a                                                     | DELETE                                                          | (NOTE FIG                          | 13. 1.1 TITLE 1.2 NAME 1.3 STREEL 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREEL 3.1 TITLE 3.2 NAME 3.3 STREEL 3.3 STREEL 3.3 STREEL 3.4 CITY-S 3.5 NAME 3.5 NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ADDRESS - ZIP - ADDRESS - ADDRESS - ADDRESS                          | red when reinstating)                                        |                                                 | DATE  CERS AND DIREC  Chang                 | TORS IN 12 e                          |
| SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME                                                                                                                                   | PSTD<br>LAGUE,<br>1756 HC                              | OFFICERS A  LESTER DWLAND BLVD                                                                                         | ant and title it a                                                     | DELETE                                                          | (NOTE FIG                          | 13. 1.1 TITLE 1.2 NAME 1.3 STREEL 1.4 CITY-SI 2.1 TITLE 2.2 NAME 2.3 STREEL 3.1 TITLE 3.2 NAME 3.3 STREEL 3.4 CITY-SI 3.4 CITY-SI 4.1 TITLE 4.2 NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | ADDRESS - ZIP  ADDRESS - ZIP  ADDRESS - ZIP                          | red when reinstating)                                        |                                                 | DATE  CERS AND DIREC  Chang  Chang          | TORS IN 12 e                          |
| SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-S1-ZIP  TITLE  NAME  STREET ADDRESS                                                                         | PSTD<br>LAGUE,<br>1756 HC                              | OFFICERS A  LESTER DWLAND BLVD                                                                                         | ant and title it a                                                     | DELETE                                                          | (NOTE FIG                          | 13. 1.1 TITLE 1.2 NAME 1.3 STREEL 1.4 CITY-SI 2.2 NAME 2.3 STREEL 2.4 CITY-SI 3.1 TITLE 3.2 NAME 3.3 STREEL 3.4 CITY-SI 4.1 TITLE 4.2 NAME 4.3 STREEL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ADDRESS - ZIP  ADDRESS - ZIP  ADDRESS - ZIP                          | red when reinstating)                                        |                                                 | DATE  CERS AND DIREC  Chang  Chang          | TORS IN 12 e                          |
| SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP                                  | PSTD<br>LAGUE,<br>1756 HC                              | OFFICERS A  LESTER DWLAND BLVD                                                                                         | ant and title it a                                                     | DELETE  DELETE                                                  | (NOTE Box                          | 13. 1.1 TITLE 1.2 NAME 1.3 STREEL 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREEL 3.1 TITLE 3.2 NAME 3.3 STREEL 4.1 TITLE 4.1 TITLE 4.2 NAME 4.3 STREEL 4.3 STREEL 4.4 CITY-ST                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | ADDRESS - ZIP  ADDRESS - ZIP  ADDRESS - ZIP                          | red when reinstating)                                        |                                                 | DATE  CERS AND DIREC  Chang  Change         | TORS IN 12 e                          |
| SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-S1-ZIP  TITLE                                                     | PSTD<br>LAGUE,<br>1756 HC                              | OFFICERS A  LESTER DWLAND BLVD                                                                                         | ant and title it a                                                     | DELETE                                                          | (NOTE Box                          | 13. 1.1 TITLE 1.2 NAME 1.3 STREEL 1.4 CITY-SI 2.2 NAME 2.3 STREEL 2.4 CITY-SI 3.1 TITLE 3.2 NAME 3.3 STREEL 4.1 TITLE 4.1 TITLE 4.2 NAME 4.3 STREEL 4.3 STREEL 4.5 TITLE 4.5 TITLE 4.5 TITLE 4.5 TITLE 4.6 TITLE 4.6 TITLE 4.6 TITLE 4.7 TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | ADDRESS - ZIP  ADDRESS - ZIP  ADDRESS - ZIP                          | red when reinstating)                                        |                                                 | DATE  CERS AND DIREC  Chang  Chang          | TORS IN 12 e                          |
| SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME                                                                        | PSTD<br>LAGUE,<br>1756 HC                              | OFFICERS A  LESTER DWLAND BLVD                                                                                         | ant and title it a                                                     | DELETE  DELETE                                                  | (NOTE Box                          | 13. 1.1 TITLE 1.2 NAME 1.3 STREEL 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREEL 3.1 TITLE 3.2 NAME 3.3 STREEL 4.1 TITLE 4.1 TITLE 4.2 NAME 4.3 STREEL 4.3 STREEL 4.4 CITY-ST                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | ADDRESS - ZIP  ADDRESS - ZIP  ADDRESS - ZIP                          | red when reinstating)                                        |                                                 | DATE  CERS AND DIREC  Chang  Change         | TORS IN 12 e                          |
| SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP       | PSTD<br>LAGUE,<br>1756 HC                              | OFFICERS A  LESTER DWLAND BLVD                                                                                         | ant and title it a                                                     | DELETE  DELETE                                                  | (NOTE Bo)                          | 13. 1.1 TITLE 1.2 NAME 1.3 STREEL 1.4 CITY-SI 2.2 NAME 2.3 STREEL 2.4 CITY-SI 3.1 TITLE 3.2 NAME 3.3 STREEL 4.1 TITLE 4.1 TITLE 4.2 NAME 4.3 STREEL 4.3 STREEL 5.1 TITLE 5.2 NAME 5.3 STREEL 5.3 STREEL 5.4 CITY-SI 5.5 TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | ADDRESS -ZIP  ADDRESS -ZIP  ADDRESS -ZIP  ADDRESS -ZIP  ADDRESS -ZIP | red when reinstating)                                        |                                                 | DATE  CERS AND DIREC  Chang  Change         | TORS IN 12 e                          |
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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OPERING OFFICER OR DIRECTOR

1-23-96

904-775-0041