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PROFIT
CORPORATION
ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L88757

(4)

TRUE COST, INC.

Principal Place of Business

3355 BROOKSHIRE PENSACOLA FL 32504 Mailing Address

3355 BROOKSHIRE PENSACOLA FL 32504-4415

FILED Apr 16 1997 8:00am Secretary of State



			,			
				3. Date Incorporated or Qualified 07/20/1990	3a. Date of Last R	eport
,	lace of Business	2a. Mailing Address		4. FEI Number	Ap	plied For
)	BAYOU BLVD		10249	59-3077079		t Applicable
Suite Apt 2 6-8		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 A	
City & State	~ .	City & State	ريسو	8. Election Campaign Financing	\$5.00	Мау Ве
PEALS	Acola, FL	28 PENSACOLA	PL.	Trust Fund Contribution	Added t	o Fees
32503-	1299 25 USA	^{Zip} 32503-1299	Country 30 USA	8. This corporation has liability to		1 9 9.032,
2000	9, Name and Address of Cu		30 USA	Florida Statutes 10. Name and Address of New F	Yes No	
CHA	ANDLER, JAMES W.		81 Name			
	5 BROOKSHIRE		20 0	CHANDLER JAMES Address (P.Q. Box Number is Not Accept	<u>v.</u>	
	ISACOLA FL 32504		82 Street	Address (P.O. Box Number is Not Accept	able)	
1 611	10/1000112 02001		83	100001100		
			84 City		12-1 20	D - 1-
		_	84 City	ENSACOLA d corporation submits this statement for the	FL 85 32	Code 50 3-/28 9
(1. Persianit	to the provisions of Sections 207	0502 and 607.1508 Florida Statute	s, the above-named	corporation submits this statement for the	purpose of changing it	s registered
office or n	registered agent of both, is the S in familiar with, and accept the o	State of Florida, 80 th change was a	uthorized by the cor rida Statutes	d corporation submits this statement for the poration's board of directors. I hereby acc	ept the appointment as	registered
IGNATURE	X . Truly					
(SIMMEDINE	Study System production name of regulation	diagent and title if applicable (NOTE	Registered Agent signatur	e required when reinstating)	DATE	
2.	OFFICERS	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFF		
tH	D	☐ DELETE	1.1 TITLE	 D	Change	Additio
AM4	CHANDLER, JAMES W		1.2 NAME	CHANDLER JAMES W.	a	
Ese LADORESS	3355 BROOKSHIRE		1.3 STREET ADDRESS	4400 BAYOU BLUD 6-	3	
			I.B DINEET HBD 1100			
······································	PENSACOLA FL		14 CITY-ST-ZIP		03-1299 <u> </u>	
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Lemmo officer or director of the corporation of the receiver or truste empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an affact pop with an address.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER

4-10-97

904-475-0175