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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L91772

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WELLBORN INVESTMENTS, INC.

FILED Apr 25 1997 8:00am Secretary of State



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LAKE CITY FL 32055								4.511		
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P. Name and Address of Current Registered Agent CRAPPS, DANIEL ROTHE 13, 80X 11546- SUFFE 1300 LAKE CITY FL 32055 41 City FL 3205 11. Pursuant to the previsions of Sections 607 0502 and 607 1508. Florids Statutes, the above named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florids, Such changes was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florids, Such changes was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florids, Statutes, the above named corporation submits this statement for the purpose of changing its registered agent and interface of the previous was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and interface of the purpose of previous agent and sine face cache the object of the purpose of changing its registered agent and agent and sine face cache the object of the purpose of directors. I hereby accept the appointment as registered agent and sine face cache the object of the purpose of previous agent and sine face cache the object of the purpose of previous agent and sine face cache the object of the purpose of the appointment as registered agent and sine face cache the object of the purpose of the appointment as registered agent and sine face cache and sine face cache the purpose of the appointment as registered agent and sine face cache the purpose of the appointment as registered agent and sine face cache the purpose of the appointment as registered agent and sine face cache the purpose of the appointment as registered agent and sine face cache the purpose of the appointment as registered agent and sine face cache agent and s	L	Zφ		ntry		1			199.032,	
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LAKE CITY FL 32055 84	·		- 1	82 S	rget Addre	ess (P.O. Box Number is Not Acceptable	e)			
B4 City			ł		7700	0 0370				┨
11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE SUPPORT Priest of provide and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. THE PROPERTY PLANE OF THE PROVIDED AGENCY OF THE PROPERTY OF THE PROVIDED AGENCY OF THE PROVIDED AGEN	LARC OIL FL 32003							-r <u></u> -		_
agent Lan familier with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Synthet interior provide may be depended agent and file # applicable NOTE Repaired Agent signature required when renetating) DATE 12.				84 Ci	ty		FL "	Zip	Code	
Agent I an familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Synthic types of previous previous agent will file # applicable. POFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PORAPPS, DANIEL RR 19. BOX +154-6 CHY-ST, 7P LAKE CITY FL SOUTH ST, 7P LAKE CITY FL SOUTH ST, 7P LOTE ST, 7P LO	11. Pursuant to the provisions of Sections 607	.0502 and 607.1508, Florida Statut	tes, the ab	xove-na	med corpo	pration submits this statement for the pu	rpose of cha	nging it	s registered	1
NOTE Registred Agert signed or precident of precidents depend will the Application. NOTE Registred Agert signature required whon retrailing) DATE	agent. I am familiar with, and accept the o	bligations of, Section 607.0505, Fl	orida Statu	utes.	COLPORAL	one board of directors. Thereby accept	t ine appointi	IOIIL GS	registered.	
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE NAME CRAPPS, DANIEL RR-19, BOX + 165+0 CHANGE CRAPPS, DANIEL RR-19, BOX + 165+0 CHANGE CHY-SI-2P LAKE CITY FL TITLE S CUT-SI-2P LAKE CITY FL TITLE S CUT-SI-2P LIVE OAK FL TOLE SIREE ADDRESS CUT-SI-2P LIVE OAK FL TOLE SIREE ADDRESS CUT-SI-2P TITLE SIREE ADDRESS CUT-SI-2P TITL		department the Herschechle AVO	C. Carintarad	Agestule	not so togular	dubes circutation)	DATE			
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CITY ST-7/P 64 CITY-ST-7/P 14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3)(i). Fiorida Statutes, I further certify that the		ofied with this filing does not quali				in Section 119 07(3)(i) Florida Statutes	. I further cer	tify that	the	\dashv

Information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address.