FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M78425

1. Corporation Name

PENATOR PLANTING INDUSTRIES IN

(9)

REINFORCED PLASTIC INDUSTRIES, INC.

FILED May 05 1998 8:00am Secretary of State



Cooker Fig. 34/81-004 USE Fig. 3	Principal Place	e of Business	Mailing Address					
2. Pincipal Piaco of Business 2a. Malling Address 3. Date Incorporated of Outlifed								
2. Principal Piace of Business 2. Mailing Address 3. 4. FER Number 59-2897467 Applicable CV4/2/1988 Applicable Service Suite, Aprt #, etc. Suite, Ap								
2. Principal Place of Business	US		US					
Suito, Apt #, etc 2								
Suite, Apt 8, etc. Suite, Apt 8, etc. Suite, A	2. Principal Pi	ace of Business	2a. Mailing Address	-	م	4. FEI Number	TA	pplied For
Suite, Apt #, etc 21 22 23 23 24 27 25 25 27 27 28 27 28 27 28 27 28 27 28 28	21		26			59-2897467	 	
City & State Ci		#, etc	Suite, Apt. #, etc.				\$8.75	Additional
City & State City & State	22		27			5. Certificate of Status Desired		
Trust Fund Contribution Added to Fees		9				6. Election Campaign Financing	\$5.00	May Bo
Zip Country Zip Sol	23		28			· · · · · · · · · · · · · · · · · · ·		
28 28 29 30 Personal Property Tax tute June 30 vise No 9. Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent MAGE, JAMES M.		Country		Countr	y			
B. Name and Address of Current Registered Agent MAGE, JAMES M. SUITE 102 80 E. LYNNSTON STREET ORLANDO Ft. 32801 84 City FL. 85 Zip Code 11. Pustagent to the provisions of Sections 607 (1505 Fibrids 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 6506, Fiorida Statutes. SIGNATURE Signature, bodd or prince agent agent agent agent agent agent agent agent. I am familiar with, and accept the obligations of, Section 607 6506, Fiorida Statutes. SIGNATURE OP OF FICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 12. OP OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. PILE OP OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE ORLANDO Ft. 1. STREET ADDRESS 1.	24	<u> </u>		30				
SUITE 102 DO E. LIVINGSTON STREET ORLANDO FL 32801 13. 14. City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607 0402 and 807 1506. Florids Statutes, the aboven-named corporation submits this statement for the purpose of changing its registered agent of victor in the State of Florids Statutes, the aboven-named corporation submits this statement for the purpose of changing its registered agent and femiliar with, and accept the obligations of, Section 607 0505, Florida Statutes. 12. 13. 14. City FL 85 Zip Code 14. City FL 85 Zip Code 15. Purpose of changing its registered different in the State of Florids Statutes. 15. City State Address (P.O. Box Number is Not Acceptable) 16. City FL 85 Zip Code 16. City State Address (P.O. Box Number is Not Acceptable) 17. Pursuant to the provision of Section 607 0605, Florida Statutes. 18. City State Address (P.O. Box Number is Not Acceptable) 18. City State Address (P.O. Box Number is Not Acceptable) 18. City State Address (P.O. Box Number is Not Acceptable) 18. City State Address (P.O. Box Number is Not Acceptable) 19. City State Address (P.O. Box Number is Not Acceptable) 19. City State Address (P.O. Box Number is Not Acceptable) 19. City State Address (P.O. Box Number is Not Acceptable) 10. City State Address (P.O. Box Number is Not Acceptable) 10. City State Address (P.O. Box Number is Not Acceptable) 10. City State Address (P.O. Box Number is Not Acceptable) 10. City State Address (P.O. Box Number is Not Acceptable) 11. Pursuant to the provision of City State Address (P.O. Box Number is Not Acceptable) 12. City State Address (P.O. Box Number is Not Acceptable Address (P.O. Box Number is Not Acceptable Address (P.O. Box Number is Number is Not Acceptable Address (P.O. Box Number is Number is Not Acceptable Address (P.O. Box Number is Number is Not Acceptable Address (P.O. Box Number is N	1			1		10. Name and Address of New Registers	ed Agent	
SUITE 102 DO E. LIVINGSTON STREET ORLANDO FL 32801 13. 14. City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607 0402 and 807 1506. Florids Statutes, the aboven-named corporation submits this statement for the purpose of changing its registered agent of victor in the State of Florids Statutes, the aboven-named corporation submits this statement for the purpose of changing its registered agent and femiliar with, and accept the obligations of, Section 607 0505, Florida Statutes. 12. 13. 14. City FL 85 Zip Code 14. City FL 85 Zip Code 15. Purpose of changing its registered different in the State of Florids Statutes. 15. City State Address (P.O. Box Number is Not Acceptable) 16. City FL 85 Zip Code 16. City State Address (P.O. Box Number is Not Acceptable) 17. Pursuant to the provision of Section 607 0605, Florida Statutes. 18. City State Address (P.O. Box Number is Not Acceptable) 18. City State Address (P.O. Box Number is Not Acceptable) 18. City State Address (P.O. Box Number is Not Acceptable) 18. City State Address (P.O. Box Number is Not Acceptable) 19. City State Address (P.O. Box Number is Not Acceptable) 19. City State Address (P.O. Box Number is Not Acceptable) 19. City State Address (P.O. Box Number is Not Acceptable) 10. City State Address (P.O. Box Number is Not Acceptable) 10. City State Address (P.O. Box Number is Not Acceptable) 10. City State Address (P.O. Box Number is Not Acceptable) 10. City State Address (P.O. Box Number is Not Acceptable) 11. Pursuant to the provision of City State Address (P.O. Box Number is Not Acceptable) 12. City State Address (P.O. Box Number is Not Acceptable Address (P.O. Box Number is Not Acceptable Address (P.O. Box Number is Number is Not Acceptable Address (P.O. Box Number is Number is Not Acceptable Address (P.O. Box Number is Number is Not Acceptable Address (P.O. Box Number is N	MA	GEE, JAMES M.		81	Name			
ODE LUNNOSTON STREET ORLANDO R. 32801 83 Street Address (F.C. Box Nothliber is Not Acceptable) 84 City FL 85 Strip Code FL 85 Strip Code						(1		
ORLANDO FL 32801 58					Street Ad	dress (P.O. Box Number is Not Acceptable)		
11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both in the Statio of Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, or both in the Statio of Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent and after a provision of the purpose of changing its registered directors. I hereby accept the appointment as registered agent and after a purpose of changing its registered directors. I hereby accept the appointment as registered agent agent are after a purpose of changing its registered agent agent are after a purpose of changing its registered agent agent are after a purpose of changing its registered agent agent are after a purpose of changing its registered agent agent are after a purpose of changing its registered agent agent are after a purpose of changing its registered agent agent are after a purpose of changing its registered agent agent are after a purpose of changing its registered agent agent are after a purpose of changing its registered agent agent are after a purpose of changing its registered agent agent are after a purpose of changing its registered agent agent are after a purpose of changing its registered agent agent are after a purpose of changing its registered agent agent are agent agent and agent are after a purpose of change agent				83	1			
11. Pursuant to the provisions of Sections 607,0502 and 607,1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent or both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent or both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent in the final accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE SIGNATURE Signature, Speed or present neuror of registered agent in the final equicitation. (NOTE Registered Agent sequence where required whem recitating) DATE 12. OF FICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. CROFOOT, KROY E. 3100, JOHN YOUNG PKWY. ORLANDO FL 1 ADITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. INTER ADORESS ORLANDO FL 1 ADITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. INTER ADORESS ORLANDO FL 2 2 MAWE 3100, JOHN YOUNG PKWY. ORLANDO FL 1 ADITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. INTER ADORESS ORLANDO FL 2 2 MAWE 3 3 STREET ADORESS ORLANDO FL 3 3 STREET ADORESS ORLANDO FL 4 2 MAWE 3 3 STREET ADORESS ORLANDO FL 4 2 MAWE 3 3 STREET ADORESS ORLANDO FL 4 2 MAWE 3 3 STREET ADORESS ORLANDO FL 5 STREET ADORESS O	011	D 1 1 0 1 0 0 0 0 1			l			
11. Pursuant to the provisions 07 Sections 607 Sections 6				84	City		85 Zip	Code
office or registered agent, or both in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and ment agent and accept the obligations of, Section 607,0505, Florida Statutes. Signature Sign	44 Duramont	to the provisions of Sections 607.0602	and 607 1509 Florida Statut	oc. the abov	o named oc		<u> </u>	ite registered
SIGNATURE 12.	office or re	egistered agent, or both, in the State of	of Florida Such change was a	uthorized b	y the corpor	ation's board of directors. I hereby accept the E	ppointment as	s registered
Signature, bread or prices name of inspalated and instance accepted when recentating) DATE	agent. I a	m familiar with, and accept the obligat	lions of Section 607.0505, Flo	rida Statute	5 .			
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE CROFGOT, KROY E. 11 TITLE 12 MAME 13 STREET ADDRESS 14 CITY-ST-ZIP 14 CITY-ST-ZIP 14 CITY-ST-ZIP 15 CITY-S	SIGNATURE							
TITLE NAME CROFOOT, KROY E. 3100 JOHN YOUNG PKWY. ORLANDO FL THOMPSON, ERIC E. 6307 NIGHTWIND CIRCLE ORLANDO FL TITLE V DELETE 21 TITLE V DELETE 21 TITLE V DELETE 21 TITLE V DELETE 21 TITLE V DELETE 21 TITLE V DELETE 21 TITLE V DELETE 21 TITLE V DELETE 31 TITLE V DELETE 51 TITLE CROFOOT, FRANCIS 31 STREET ADDRESS 31 STREET ADDRESS 31 DI JOHN YOUNG PKWY. ORLANDO FL DELETE 51 TITLE 52 FAMME 53 STREET ADDRESS 54 CITY-51-72 P TITLE DELETE 61 TITLE 62 FAMME 53 STREET ADDRESS 64 CITY-51-72 P TITLE DELETE 61 TITLE 62 FAMME 63 STREET ADDRESS 64 CITY-51-72 P TITLE DELETE 61 TITLE 63 TITLE 64 TITLE 65 TITLE 65 TITLE 66 TITLE 67 TITLE 68 T					ent signature req			BS IN 12
NAME STREET ADDRESS 3100 JOHN YOUNG PKWY. ORLANDO FL THOMPSON, ERIC E. STREET ADDRESS GOT, NIGHTWIND CIRCLE ORLANDO FL V DELETE 22 JUME 23 STREET ADDRESS GOT, NIGHTWIND CIRCLE ORLANDO FL V DELETE 23 JUME 23 STREET ADDRESS GOT, ST.2-IP V MAGNUSON, JAMES STREET ADDRESS GOTY-ST.2-IP NAME MAGNUSON, JAMES STREET ADDRESS GOTY-ST.2-IP NAME MAGNUSON, JAMES STREET ADDRESS GOTY-ST.2-IP TITLE NAME DANIELS, MARK GOO STONINGTON DR. SO. TAMPA FL STREET ADDRESS GOTY-ST.2-IP STREET ADDRESS GOTY-ST.2-IP TITLE NAME CROFOOT, FRANCIS STREET ADDRESS STREET ADDRESS GOTY-ST.2-IP GOTY-ST.2-IP STREET ADDRESS GOTY-ST.2-IP GOTY-ST.2-IP GOTY-ST.2-IP GOTY-ST.2-IP Addition Addition Change Addition Addition Addition Change Addition Addition Addition Addition Addition ADDRESS GOTY-ST.2-IP GOTY		DP OF TICENS AND				ADDITIONS/CITATION TO CITACENS A		
STREET ADDRESS CITY-ST-ZP ORLANDO FL TILLE THOMPSON, ERIC E. STREET ADDRESS CITY-ST-ZIP TILLE THOMPSON, ERIC E. STREET ADDRESS CITY-ST-ZIP TILLE THOMPSON, LERIC E. STREET ADDRESS CITY-ST-ZIP TILLE THOMPSON, LERIC E. STREET ADDRESS CITY-ST-ZIP TILLE THOMPSON, JAMES STREET ADDRESS CITY-ST-ZIP TILLE THE THOMPSON, JAMES STREET ADDRESS CITY-ST-ZIP TILLE THE THE THE THE THE THE THE THE THE TH		CROFOOT, KROY F.				,	C Outlings	
CITY-ST-ZP ORLANDO FL ILLE THOMPSON, ERIC E. 6307 NIGHTIVIND CIRCLE ORLANDO FL TITLE MARE MAGNUSON, JAMES 9884 LAUREL VALLEY DR WINDERMERE FL TITLE TITLE DELETE 3.1 TITLE MAGNUSON, JAMES 9884 LAUREL VALLEY DR 3.3 STREET ADDRESS WINDERMERE FL TITLE DANIELS, MARK 4 2 NAME 4 2 NAME STREET ADDRESS CITY-ST-ZP TITLE DANIELS, MARK 4 2 NAME 4 3 STREET ADDRESS CITY-ST-ZP TITLE SOO STONINGTON DR. SO. 4 3 STREET ADDRESS CITY-ST-ZP TITLE SOO STONINGTON DR. SO. 4 3 STREET ADDRESS CITY-ST-ZP TITLE SOO STONINGTON DR. SO. 4 3 STREET ADDRESS TAMPA FL STREET ADDRESS 3100 JOHN YOUNG PKWY. ORLANDO FL DELETE 6 1 TITLE DELETE 6 1 TITLE Addition Addition Addition Addition Addition Change Addition Addition Addition Addition Change Addition Change Addition Change Addition Addition Change A	1							Š
TITLE THOMPSON, ERIC E. STREET ADDRESS GOT NIGHTWIND CIRCLE ORLANDO FL OR								\i
THOMPSON, ERIC E. 6307 NIGHTWIND CIRCLE ORLANDO FL 2.2 MAME 2.3 STREET ADDRESS CITY-ST-ZIP TITLE MAGNUSON, JAMES 384 LAUREL VALLEY DR WINDERMERE FL 3.4 CITY-ST-ZIP TITLE T DELETE 3.4 CITY-ST-ZIP TITLE T AMPA FL TAMPA FL TITLE S DELETE STREET ADDRESS CITY-ST-ZIP TITLE T AMPA FL DELETE STREET ADDRESS CITY-ST-ZIP TITLE S DELETE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TITLE S DELETE STREET ADDRESS CITY-ST-ZIP TITLE S STREET ADDRESS STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TITLE SS STREET ADDRESS CITY-ST-ZIP STREET ADDRESS STREET ADDRESS CITY-ST-ZIP STREET ADDRESS STREET ADDRESS CITY-ST-ZIP STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET AD		V	Deter		ST-ZIP		Change	Addition
STREET ADDRESS CITY-ST-ZIP TITLE V MARM MAGNUSON, JAMES 9884 LAUREL VALLEY DR WINDERMERE FL TITLE TITLE DANIELS, MARK 6509 STONINGTON DR. SO. TAMPA FL TITLE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CI	l l	THOMPSON EDIC E	C Deceie				[_] Cliange	
ORLANDO FL ORLANDO FL ORLANDO FL 2 4 CITY-ST-ZIP ITILE MAGNUSON, JAMES 9884 LAUREL VALLEY DR 33 3 STREET ADDRESS WINDERMERE FL 34 CITY-ST-ZIP TITLE DANIELS, MARK 6509 STONINGTON DR. SO. TAMPA FL TITLE CROFOOT, FRANCIS 3100 JOHN YOUNG PKWY. ORLANDO FL DELETE 51 TITLE ORLANDO FL DELETE 51 TITLE 52 NAME 53 STREET ADDRESS CITY-ST-ZIP TITLE CROFOOT, FRANCIS 3100 JOHN YOUNG PKWY. ORLANDO FL DELETE 61 TITLE Addition DELETE 61 TITLE 1 Change Addition Ad	1				ľ			1
TITLE WAGNUSON, JAMES MAGNUSON, JAMES 9884 LAUREL VALLEY DR 32 NAME 33 STREET ADDRESS CITY-ST-ZIP TITLE T DELETE Addition DANIELS, MARK 6509 STONINGTON DR. SO. TAMPA FL STREET ADDRESS CITY-S1-ZIP DELETE 41 TITLE A4 CITY-S1-ZIP A4 CITY-S1-ZIP Change Addition Addition Addition Addition Addition Addition Change Addition Addition Addition Addition Addition ADDITER STREET ADDRESS CITY-S1-ZIP TITLE CROFOOT, FRANCIS 3100 JOHN YOUNG PKWY. ORLANDO FL DELETE DELETE 61 TITLE NAME 62 NAME 63 STREET ADDRESS CITY-S1-ZIP TITLE ADDRESS CITY-S1-ZIP Addition								1
MAGNUSON, JAMES 9884 LAUREL VALLEY DR WINDERMERE FL 34 CITY-ST-ZIP TITLE DANIELS, MARK 6509 STONINGTON DR. SO. TAMPA FL TITLE S CITY-ST-ZIP TITLE CROFOOT, FRANCIS STREET ADDRESS CITY-ST-ZIP TITLE S CROFOOT, FRANCIS STREET ADDRESS CITY-ST-ZIP TITLE ORLANDO FL DELETE S1 STREET ADDRESS CITY-ST-ZIP TITLE S CROFOOT, FRANCIS STREET ADDRESS CITY-ST-ZIP TITLE S STREET ADDRESS CITY-ST-ZIP TITLE S STREET ADDRESS CITY-ST-ZIP TITLE S STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TITLE S-CROFOOT, FRANCIS STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP TITLE S-CROFOOT, FRANCIS STREET ADDRESS CITY-ST-ZIP STREET AD		ONDANDO FE	CT SCLEEN	_	ST-ZIP		170	Address -
STREET ADDRESS CITY-ST-ZIP WINDERMERE FL 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP TITLE NAME DANIELS, MARK 6509 STONINGTON DR. SO. TAMPA FL 11TLE S TAMPA FL 14 CITY-ST-ZIP TITLE CROFOOT, FRANCIS STREET ADDRESS STREET ADDRESS CITY-S1-ZIP TITLE S STREET ADDRESS STREET ADDRESS STREET ADDRESS CITY-S1-ZIP TITLE S CROFOOT, FRANCIS STREET ADDRESS CITY-S1-ZIP TITLE S STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS CITY-S1-ZIP TITLE S STREET ADDRESS STREET ADDRES		AAAGANIGGAL IAAAGG	L. DELERE				Change	L.J Addition
CITY-ST-ZIP WNDERMERE FL 3.4 CITY-ST-ZIP TITLE T	F		í	1	}			
TITLE	STREET ADDRESS			3.3 STREE	t address			
NAME STREET ADDRESS CITY-S1-ZIP TAMPA FL S CROFOOT, FRANCIS STREET ADDRESS CITY-S1-ZIP NAME CROFOOT, FRANCIS STREET ADDRESS CITY-S1-ZIP ORLANDO FL DELETE S S CITY-S1-ZIP S S CITY-S1-ZIP ORLANDO FL DELETE S S TREET ADDRESS CITY-S1-ZIP DELETE S S TREET ADDRESS CITY-S1-ZIP Change Addition Change Change Addition Change Cha		THRUCOMENE PL	1 +51555	_	ST-ZIP		Па:	1 4 4 400
STREET ADDRESS CITY-S1-ZIP TAMPA FL STREET ADDRESS CITY-S1-ZIP TITLE S CROFOOT, FRANCIS STREET ADDRESS CITY-S1-ZIP ORLANDO FL DELETE 5.1 TITLE 5.2 NAME 5.2 NAME 5.3 STREET ADDRESS CITY-S1-ZIP ORLANDO FL DELETE 6.1 TITLE 6.3 STREET ADDRESS 6.4 CITY-S1-ZIP TITLE CAMPE 6.3 STREET ADDRESS CITY-S1-ZIP 14. 1 hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information		DANNELS MADY	☐ DELETE	1]		L Change	☐ V00HI00 [
TAMPA FL 14 CITY-SI-ZIP TAMPA FL 44 CITY-SI-ZIP TAMPA FL 44 CITY-SI-ZIP TAMPA FL 44 CITY-SI-ZIP CROFOOT, FRANCIS 51 NAME STREET ADDRESS CITY-SI-ZIP ORLANDO FL DELETE 51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-SI-ZIP 61 TITLE 62 NAME 63 STREET ADDRESS CITY-SI-ZIP 14. 1 hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information	NAME							
TITLE S DELETE 5.1 TITLE 5.2 NAME CROFOOT, FRANCIS STREET ADDRESS CITY-S1-ZIP ORLANDO FL 5.3 STREET ADDRESS CITY-S1-ZIP DELETE 6.1 TITLE 6.2 NAME STREET ADDRESS CITY-S1-ZIP G.3 STREET ADDRESS CITY-S1-ZIP 6.4 CITY-S1-ZIP 14. 1 hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information	STREET ADDRESS			4.3 STREE	T ADDRESS			
NAME CROFOOT, FRANCIS 3100 JOHN YOUNG PKWY. ORLANDO FL DELETE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP TITLE DELETE 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS CITY-ST-ZIP 14. 1 hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information	CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	4.4 CITY -	ST-ZIP		·	
STREET ADDRESS CITY-S1-ZIP ORLANDO FL 5.3 STREET ADDRESS 5.4 CITY-S1-ZIP 5.4 CITY-S1-ZIP 6.1 TITLE NAME STREET ADDRESS CITY-S1-ZIP 6.3 STREET ADDRESS CITY-S1-ZIP 14. 1 hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information	TITLE	▼	☐ D€LETE	5.1 TETLE			L Change	☐ Addition
CITY-S1-ZIP ORLANDO FL 5.4 CITY-S1-ZIP TITLE NAME STREET ADDRESS CITY-S1-ZIP 14. 1 hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information	NAME			5.2 NAME				
TITLE DELETE 6.1 TITLE Change Addition NAME STREET ADDRESS CITY-S1-ZIP 14. 1 hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information	STREET ADDRESS			5.3 STREE	F ADDRESS			
NAME STREET ADDRESS CITY-S1-ZIP 14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information	CITY-ST-ZIP	UHLANDO FL		5.4 CITY-5	ST-ZIP		· · · · · · · · · · · · · · · · · · ·	
STREET ADDRESS CTY-S1-ZIP 14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information	TITLE		DELETE	6.1 TITLE			Change	Addition
CITY-ST-ZIP 64 CITY-ST-ZIP 64 CITY-ST-ZIP 14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information	NAME			6.2 NAME				
14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information	STREET ADDRESS			6.3 STREET	TADORESS [
14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information	CITY-ST-ZIP			6.4 CITY-	ST-ZIP]
	14. I hereby c	ertify that the information supplied wit	h this filing does not qualify fo	r the exemp	otion stated i	in Section 119.07(3)(i), Florida Statutes. I further	certify that the	e information