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included on this report or supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information this report or supplemental 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 anged, or on an attachment with an address, with all other like empowered. NATURE: Supplemental 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 anged, or on an attachment with an address, with all other like empowered. Somets G. NATURE: Supplemental 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 anged. Statutes; and that my name appears in Block 10 or Block 11 if Somets G. Frank I w. St. 02/19/02 352-481-296	E ADDRESS ST-ZIP HAW T ADDRESS ST-ZIP HAW ADDRESS ST-ZIP HAW ADDRESS T-ZIP HAW ADDRESS ST-ZIP HAW	OFFICERS AND DIRI D S, JACQUELINE P B SOUTHEAST US HWY 301 N THORNE FL 32640 NKLIN, JAMES G B SOUTHEAST US HWY 301 NO THORNE FL 32640 KKLIN, BETTY R SOUTHEAST US HWY 301 NO THORNE FL 32640	Trusi Fund ECTORS Delete Delete Delete Delete Delete Delete	TITLE NAME STREET ADD CITY-ST-ZI TITLE NAME	DATE PSTD Ander BA28 Haw DFrank BA28 Haw PRESS PRESS	added to Fees DITIONS/CHANGE Son, Mayor Southeas Harre 10/29	Depairs TO OFFICERS AN AND PUS Howy FC 32640 TO 2-01146-	DDIRECTORS Change Change Change Change Change	Addition Addition Addition Addition Addition Addition