	IOWN I	NT # NOOOOO			S	FIL b 24, 200 ecretary 02-24-2002 9001	02 8:00 v of Sta	nte	
Suite, Apt. #, etc.     DO NOT WRITE IN THIS SPACE       City & State     City & State       Z.p     Country       Zip     Country       BRANNAN, MARGI       13106 AW 19TH PLACE       GAMESVILLE FL       Brannan, Markei       Brannan, Brannan	ith place		13106 NW 19TH PLACE						
City & State September 29-3676628 City & State September 29-3676628 City & State September 29-3676628 September 29-367662 September 29-3676628 September 29-367662 September 29-36766 Septe	Place of I	Business	3. Mailing Address						
Zip     Country     Zip     Country     Zip     Country     S. Certificate of Status Desired     Status Desired       S. Name and Address of Current Registered Agent     Name     Name and Address of Names Desired Agent     Name       BRANNAN, MARGI     Name     Street Address (P.O. Box Number is Not Acceptable)       13106 NW 19TH PLACE     City     FL     Zip Coda       GAINESVILLE FL     City     FL     Zip Coda       It me above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.     Name       MGUATURE     FLE NOW: FEE IS \$61.25     P. Election Campaign Financing     St.00 May 86       Make Check Paryable it pupptered agent and the inspirate     INDITE Registered Agent strate and registered agent and the inspirate     Mate Check Paryable it Department of Status Department of State Department of Status Department of Stat	Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE				
Zip       Country       Zip       Country       S. Certificate of Status Desired       Sta 7.5 Acting Fee Required         Image: Status Desired       S. Name and Address of Current Registered Agent       T. Name and Address of New Registered Agent         Image: Status Desired       Street Address (F.O. Box Number is Not Acceptable)       Street Address (F.O. Box Number is Not Acceptable)         Iso NW 19TH PLACE       City       FL       Zip Code         City       FL       Zip Code       City       FL       Zip Code         The above named entity submits this statement for the purpose of changing its registered agent, or both, in the state of Florida.       DVE       FL       Zip Code         Image: Street Address (F.O. Box Number is Not Acceptable)       DVE       FL       Zip Code         Image: Street Address (F.O. Box Number is Not Acceptable)       DVE       FL       Zip Code         Image: Street Address (F.O. Box Number is Not Acceptable)       DVE       FL       Zip Code         Image: Street Address (F.O. Box Number is Not Acceptable)       DVE       FL       Zip Code         Image: Street Address (F.O. Box Number is Not Acceptable)       DVE       FL       Zip Code         Image: Street Address (F.O. Box Number is Not Acceptable)       DVE       Make Chock Payable the Desitered agent and the repetable       DVE       Make Chock Payable the De	ate		City & State		4. FEI Number			oplied For	
S. Name and Address of Current Registered Agent     T. Name and Address of Current Registered Agent     Name     Name     Street Address of Nov Régistered Agent     Name     Street Address (P.O. Box Number is Not Acceptable)     City     FL     Zip Code     City     Signation     City		Country	Zip	Country			\$8.75 Add		
BRANNAN, MARGI SIDE AW 19TH PLACE GAINESVILLE FL       Street Address (P.O. Box Number Is Not Acceptable)         It is to B with 19TH PLACE GAINESVILLE FL       City       FL       Zip Code         It is above named entity submits this statement for the purpose of changing its registered office or registored agent, or both, in the state of Florida.       City       FL       Zip Code         IGNATURE       Interview hyped or printed name of registered agent and the it applicable.       (NOTE Registered Agent signature required when rentating)       OATE       OATE         IGNATURE       Interview hyped or printed name of registered agent and the it applicable.       (NOTE Registered Agent signature required when rentating)       OATE         IGNATURE       Streat Fund Contribution.       Streat Address (P.O. Box Number is Not Acceptable to Department of State       OATE         IGNATURE       Interview hyped or printed name of registered agent and the it applicable.       (NOTE Registered Agent signature required when rentating)       OATE         IGNATURE       Interview fund contribution.       Street Address (P.O. Box May Be       Make Check Payable to Department of State         Interview Mark       OPFICERS AND DIRECTORS       11.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN TITLE       Name         Interview Mark       Interview State       Interview State       Interview State       Interview State         Interview Mark       I	6. N	ame and Address of Current	Registered Agent		7. Name and Add	dress of New Régiste		<u> </u>	
Discretively, Market GAINESVILLE FL  City  FL  Zip Code  FL  City  FL  Zip Code  FL  Zip Code FL  Zip Code FL  Zip Code FL  Zip Code FL  Zip Code FL  Zip Code FL  Zip Code FL  Zip Cod									
City     FL     Zip Code       Galance of portread earte of registered agent and title if appriceble     (NOTE Registered Agent signature required when remataing)     DATE       Signature, typed or portread earte of registered agent and title if appriceble     (NOTE Registered Agent signature required when remataing)     DATE       Fille NOW: FEE IS \$61.25     9. Election Comparign Financing Trust Fund Commbution.     \$5.00 May Be Added to Fees     Make Check Payable to Department of State       D     OFFICERS AND DIRECTORS     11.     ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN T       Nee     UVERMAN, ARNOLD     Inte     Inte       Nee     UVERMAN, ARNOLD     Inte     Inte       Nee     UVERMAN, ARNOLD     Inte     Inte       Nee     UVERMAN, MARILYN     Inte     Inte       Nee     DP     Inte     Inte     Inte       Nee     DS     Inte     Inte	13106 NW 19TH PLACE				Street Address (P.O. Box Number is Not Acceptable)				
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  IGNATURE  IGNATURE  FILE NOW: FEE IS S61.25  P. Election Campaign Financing Trust Fund Contribution.  OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN  Added to FPRes  DV  UVERNAN, ARNOLD  NME  UVERNAN, ARNOLD  NME  UVERNAN, MARILYN  RET ADDRES  GOS NW 34TH TERRACE  GAINESVILLE FL 32653  Delete  TTLE  BRANNAN, TERRENCE J  BRANNAN, MARGI  BRANNAN, MARGI  TUE  D  Delete  TTLE  D  D  D  D  D  D  D  D  D  D  D  D  D				City				e	
IGNATURE       Signature, typed or phinded name of registered agent and the it applicable.       (NOTE: Registered Agent teguined when remetable)       DATE         FILE NOW: FEE IS \$61.25       9. Election Campaign Financing Trust Fund Contribution.       \$5.00 May Be Added to Fees       Make Check Payable to Department of State         D.       OFFICERS AND DIRECTORS       11.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN THE NAME       THE         D.       OFFICERS AND DIRECTORS       11.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN THE NAME       THE         V.517.PB       GAINESVILLE FL 32853       0 Delete       THE       Officers and Directors IN THE         NME       DS       0 Delete       THE       Officers and Directors IN THE         NME       DS       0 Delete       THE       Officers and Directors IN THE         NME       DS       0 Delete       THE       Officers and Directors IN THE         NME       DS       0 Delete       THE       Officers and Directors IN THE         NME       DSECTOR NN ATH TERRACCE       THE       Officers									
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FY-ST-ZIP     GAINESVILLE FL 32605     CITY-ST-ZIP     Inereby certify that the information supplier own this filing does not qualify for the exemption stated in Section 119.07(3)(i); Florida Statutes. I further certify that the information supplemental count is true and accurate and that my signature shall have the same logal effect as if made under oath; that I am an officer o of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 617; Florida Statutes; and that my name appears in Block 10 or E changed, or on an attachment with an officers, with all other like empowered.	LIVERI 6705 N GAINE DP BRANI 13106 GAINE DT BRANI 13106 GAINE D REED, 3225 N GAINE	SVILLE FL 32653 NAN, TERRENCE J NW 19TH PLACE SVILLE FL NAN, MARGI NW 19TH PLACE SVILLE FL BUTCH NW 46TH PLACE SVILLE FL 32605 JOANN NW 46TH PLACE	Delete     Delete	CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	Addition	