2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

NAME SIRET ADDRESS CITY-ST-ZP  NAME SIRET ADDRESS CITY-ST-ZP  NAME	TILE D  Of OCT -8 PN 1: 26  Principal Place of Business  Advisory 2005 T  HAVANA FL 32333  La Mailing Address  Solita, April R, etc.  Solita, April R, etc.  Solita, April R, etc.  Cry & State  Cay & S	THE HERITAGE FOUNDATION OF THE GADSDEN COUNTY AREA INC.  Principal Place of Business 204 NW 2ND ST. HAVANA FL 32333 Business 3. Mailing Address 204 NW 2ND ST. HAVANA FL 32333 Business 3. Mailing Address	THE HEI AREA IN Principal Pla 204 NW 2N HAVANA F US 2. Principal	RITAGE FOUNDATION OF NC.  Jace of Business ND ST. FL 32333	Mailing Address  204 NW 2ND ST. HAVANA FL 323	<u> </u>		1		)	
THE HERT AGE FOUNDATION OF THE GADSDEN COUNTY  Principal Place of Business  Mailing Address  2. Principal Place of Business  Suite, Apt. 4, etc.  City 6 State  City 7 Name and Address of New Registered Apent  Name  City 7 Name and Address of New Registered Apent  City 7 Name and Address of New Registered Apent  City 7 Name and Address of New Registered Apent  City 8 FL 20 Code  The Address (P.O. Box Namber is Not Acceptable)  City 7 FL 20 Code  The Address (P.O. Box Namber is Not Acceptable)  City 8 FL 20 Code  The Address (P.O. Box Namber is Not Acceptable)  City 8 FL 20 Code  The Address (P.O. Box Namber is Not Acceptable)  City 8 FL 20 Code  The Address (P.O. Box Namber is Not Acceptable)  City 8 FL 20 Code  The Address (P.O. Box Namber is Not Acceptable)  City 8 FL 20 Code  The Address (P.O. Box Namber is Not Acceptable)  City 8 FL 20 Code  The Address (P.O. Box Namber is Not Acceptable)  City 8 FL 20 Code  The Address (P.O. Box Namber is Not Acceptable)  City 8 FL 20 Code  The Address (P.O. Box Namber is Not Acceptable)  City 8 FL 20 Code  The Address (P.O. B	THE HERITAGE FOUNDATION OF THE GADSDEN COUNTY  AREA NC.  O4 OCT -8 PM 1: 26  SECRETARY OF SLATE FALLAHASSEE, FLORIDA  SECRETARY FAL	THE HERITAGE FOUNDATION OF THE GADSDEN COUNTY AREA INC.  Principal Place of Business  Suite, Apt. #, etc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  Cay	Principal Pla 204 NW 2N HAVANA F US	NC. lace of Business ND ST. FL 32333	Mailing Address 204 NW 2ND ST. HAVANA FL 323	<u> </u>		1		)	
Principal Place of Business  204 NW 2ND ST. HAVANA FL 3233 US  2. Principal Place of Business  Suite, Apt. II., etc.  Suite, Apt. III., etc.  Suite, Apt. etc.  Suite, Apt. etc.  Suite, Apt. III., etc.  Suite, Apt. III	Principal Place of Business  Making Address  204 NW 2ND ST  ANANA FL 22333  SO NW 2ND ST  HAVANA FL 22333  SO NW 2ND ST  HAVANA FL 22333  SO NW 2ND ST  ANANA FL 22333  City of State  City of State  A SE NW 2ND ST  ANANA FL 22333  City of State  So NW 2ND ST  HAVANA FL 22333  City of State  A SE NW 2ND ST  ANANA FL 22333  City of State  A SE NW 2ND ST  ANANA FL 223333  City of State  A SE NW 2ND ST  ANANA FL 22333  City of State  A SE NW 2ND ST  ANANA FL 223333  City of State  A SE NW 2ND ST  ANANA FL 223333  City of State  A SE NW 2ND ST  ANANA FL 223333  City of State  A SE NW 2ND ST  ANANA FL 223333  City of State  A SECON Number is Next Acceptable to  A State Address of New Registered Agent  A Stat	Principal Place of Business  204 NW 2ND ST. HAVANA FL 32333  2. Principal Place of Business  3. Mailing Address  204 NW 2ND ST. HAVANA FL 32333  3. Mailing Address  Suife, Apt. #, etc.  Suife, Apt. #, etc.  Suife, Apt. #, etc.  Suife, Apt. #, etc.  MOORE  CR2E037 (4/04)  Applied F.  Suife, Apt. #, etc.  Country  Zip  Country  Zip  Country  S. Certificate of Stutus Desired  Fee Required  7. Name and Address of New Registered Agent  GREGORY, WAYNE H  204 NW 2ND ST  HAVANA FL 32303  City  FLE NOW: FEE IS \$61.25  Due By Septiment 7, 2004  Police Principal Place of Business  Mailing Address  SECRETARY OF STATE  FALL All ASSEE, FL ORIDA  Applied F.  Applied F.  Name  Seried Address  7. Name and Address of New Registered Agent  Sircel Address of New Registered Agent  Fire Required  The Address of New Registered Agent  Sircel Address (P.O. Box Number is Not Acceptable)  FLE Zip Code  8. 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. I am familiar with, and acceptable of the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and acceptable of the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and acceptable of the purpose of changing Financing  SIGNATURE  Signatura horse or united name of registered agent and state / septiment of State  Due By Septiment 7, 2004  Police File Now: FEE IS \$61.25  Due By Septiment 7, 2004  Police File Now: FEE IS \$61.25  Due By Septiment 7, 2004  Police File Now: FEE IS \$61.25  Police Fil	Principal Pla 204 NW 2N HAVANA F US	lace of Business IND ST. FL 32333	204 NW 2ND ST. HAVANA FL 323			1	ICT -8 PI		
PAYANA FL 3233 US  2. Principal Place of Business  Suite, Apl. 8, etc.  Suite, Apl. 8, etc.  Suite, Apl. 8, etc.  Cay & State  Cay  Cay & State  Cay  Cay  Sarria Address of New Registered Apent  Cay  Cay  FL	204 NW 2ND 5T. HAVANA FL 2333 US  2. Principal Pietro of Businesss  3. Mailing Address  4. Fill Number  ADDRES  4. Fill Number  ADDRES  5. Centification of Status Desired	204 NW 2ND ST. HAVANA FL 32333  204 NW 2ND ST. HAVANA FL 32333  205 Principal Place of Business  3. Meiling Address  Suite, Apt. #, etc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  MOORE  CR2E037 (4/04)  City & State  Country  S. Certificate of Status Desired.  Applied Fr. Non Applied Fee Required  6. Name and Address of Current Registered Agent  7. Name and Address of New Registered Agent  Registered Agent  Street Address (P.O. Box Number is Not Acceptable)  City  FL  Zip Code  8. 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. I am familiar with, and acre the obligations of registered agent.  SIGNATURE  Street Address (P.O. Box Number is Not Acceptable)  PL  Zip Code  8. 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. I am familiar with, and acre the obligations of registered agent.  SIGNATURE  Street Address (P.O. Box Number is Not Acceptable)  PL  Zip Code  City  FL  Zip Code  R. 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. I am familiar with, and acre the obligations of registered agent.  SIGNATURE  Street Address (P.O. Box Number is Not Acceptable)  DATE  FILE NOW: FEE: IS Set 1.25  Due By Septament 7, 2004.  9. Election Campaign Financing Trust Fund Cantribution.  Added to Fees  Florida Department of State  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  Change   Added to Fees  File ROW: FEE: IS Set 1.25  SIGNATURE  STREET ADDRESS  SIGNATURE  STREET ADDRESS  SIGNATURE  STREET ADDRESS  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  Change   Address CREGOTY   ADDRESS IN 10  Change   Address CREGOTY   ADDRESS IN 10  Change   Address CREGOTY   A	204 NW 2N HAVANA F US 2. Principal	ND ST. FL 32333	204 NW 2ND ST. HAVANA FL 323				• • • • • • • • • • • • • • • • • • • •	1 1: 26	
## Principal Place of Business    Suife, Apt #, etc.	HAVANA FL 22333  LALLAHASSEE, FLORIDA  LANDORE  PROCESS  Sulte, Apt. #, etc.  Sulte, Apt. #,	## AANNA FL 32333  ## BAANA FL 3	HAVANA F US 2. Principal	FL 32333	HAVANA FL 323			- I SECH	RETARY OF	STATE	
Suite, Apt. 8, etc.  Cey & State  Country  Country  Country  Country  Country  Country  S. Certificate of Status Desired	Suite, Apt. f. etc.  Suite, Ap	Suite, Apt. #, etc.  MOORE  CR2E037 (4/04)  Applied Fr.  Street Address of Current Registered Agent  7. Name and Address of New Registered Agent  Name  GREGORY, WAYNE H 204 NW 2ND ST  HAVANA FL 32303  City  City  FL  Zip Code  8. 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. 1 am familiar with, and accidence of the purpose of changing its registered office or registered agent, or both, in the State of Florida. 1 am familiar with, and accidence of the purpose of changing its registered office or registered agent, or both, in the State of Florida. 1 am familiar with, and accidence of the purpose of changing its registered office or registered agent, or both, in the State of Florida. 1 am familiar with, and accidence of the purpose of changing its registered office or registered agent, or both, in the State of Florida. 1 am familiar with, and accidence of the purpose of changing its registered office or registered agent, or both, in the State of Florida. 1 am familiar with, and accidence of the purpose of changing its registered office or registered agent, or both, in the State of Florida. 1 am familiar with, and accidence of the purpose of changing its registered office or registered agent, or both, in the State of Florida. 1 am familiar with, and accidence of the purpose of changing its registered office or registered agent, or both, in the State of Florida. 1 am familiar with, and accidence of the purpose of changing its registered office or registered agent, or both, in the State of Florida. 1 am familiar with, and accidence of the purpose of changing its registered agent, or both, in the State of Florida. 1 am familiar with, and accidence of the purpose of changing its registered agent, or both, in the State of Florida. 1 am familiar with, and accidence of the purpose of the purpose of the purpose of th		I Place of Business							
City & State  Country  E. Conditional of Statute Desired  T. Name and Address of Statute Desired  T. Name and Address of New Registered Agent  Name  Street Address (P.O. Box Number is Net Acceptable)  City  FL  Zip Code  E. The above reared entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florids. I an familiar with, and accept me onligibilities of registered agent, or both, in the State of Florids. I an familiar with, and accept me onligibilities of registered agent, or both, in the State of Florids. I an familiar with, and accept me onligibilities of registered agent, or both, in the State of Florids. I an familiar with, and accept me onligibilities of registered agent, or both, in the State of Florids. I an familiar with, and accept me onligibilities of registered agent, or both, in the State of Florids. I an familiar with, and accept me onligibilities of registered agent, or both, in the State of Florids. I an familiar with, and accept me onligibilities of registered agent, or both, in the State of Florids. I an familiar with, and accept me onligibilities of registered agent, or both, in the State of Florids. I an familiar with, and accept me onligibilities of registered agent, or both, in the State of Florids. I an familiar with, and accept me onligibilities of registered agent, or both, in the State of Florids. I an familiar with, and accept me onligibilities of registered agent, or both, in the State of Florids and I	City & State  Country  Country  Set To Additional or State Desired.	City & State  City & State  City & State  City & State  Applied From Not Applied  Status Desired.	Cuito Am		3. Mailing Address		·				
Country	State   Stat	Country	Suite, Ap	ot. #, etc.	Suite, Apt. #, etc	<u>.c.</u>		N	OORE	CR2E037 (4/04)	ierinān iti redn
Signature of the property of t	S. Country	Country	City & Sta	late	City & State			4. FEI Number	26976	<del>  </del>	
GREGORY, WAYNE H 204 NW 2ND ST HAVANA FL 32303 -  8. The above ramed entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the deligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the deligations of registered agent.  SIGNATURE  FILE NOW: FEE IS \$51.25	GREGORY, WAYNE H 204 NW 2ND ST HAVANA FL 32303  City  City  FL  Zip Code  City  FL  Zip Code  City  FL  Zip Code  City  FL  City  FL  Zip Code	REGORY, WAYNE H 204 NW 2ND ST HAVANA FL 32303  City  FL  Zip Code  8. 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. I am familiar with, and accident the obligations of registered agent.  SIGNATURE  Signature, typed or semide name of registered agent and size if applicable.  [NOTE: Registered Agent agent and accident agent and size if applicable.  [NOTE: Registered Agent agent are size agent are size applicable.  [NOTE: Registered Agent agent are size agent agent are size applicable.  [NOTE: Registered Agent agent are size agent agent are size agent	Zip		Zip	Coun	try	<del></del>	<u> </u>	□ \$8.75 Ad	ditional
Street Address (P.O. Box Number is Not Acceptable)  Street Address (P.O. Box Number is Not Acceptable)  Street Address (P.O. Box Number is Not Acceptable)  City  FL  Zip Code  8. 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. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  FILE NOW: FEE: IS \$61.25  Due By Septianation 7. 2004  FILE NOW: FEE: IS \$61.25  Due By Septianation 7. 2004  FILE NOW: FEE: IS \$61.25  Due By Septianation 7. 2004  That Fund Contribution.  STRET ADDRESS  GREGORY, WAYNE H  SIRET ADDRESS  STRET ADDRESS  GREGORY WAYNE H  SIRET ADDRESS  GREGORY	GREGORY, WAYNE H 204 NW 2ND ST HAVANA FL 32303 -  City FL Zip Code  8. The above ramed entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Fam familiar with, and acceptable)  SIGNATURE  Signature Signature of the purpose of presence presence in a statication.  POTE Registered Agent received upon in the State of Florida. Fam familiar with, and acceptable of the presence of registered agent, or both, in the State of Florida. Fam familiar with, and acceptable of the presence of registered agent, or both, in the State of Florida. Fam familiar with, and acceptable of the presence of registered agent.  SIGNATURE  Signature Total Control Union.  FILE NOW: FEE, IS \$51.25  Due BY Segiptionest 78, 2004  FILE NOW: FEE, IS \$51.25  Due BY Segiptionest 78, 2004  FILE NOW: FEE, IS \$51.25  Due BY Segiptionest 78, 2004  FILE NOW: MAYNE H  Due BY Segiptionest 78, 2004  FILE NOW: MAYNE H  Due BY Segiptionest 78, 2004  FILE NOW: Addition from the presence agent with a state of Florida Department of State  FILE NOW: FEE, IS \$51.25  Due BY Segiptionest 78, 2004  FILE NOW: FEE, IS \$51.25  Due BY Segiptionest 78, 2004  FILE NOW: FEE, IS \$51.25  Due BY Segiptionest 78, 2004  FILE NOW: FEE, IS \$51.25  Due BY Segiptionest 78, 2004  FILE NOW: FEE, IS \$51.25  Due BY Segiptionest 78, 2004  FILE NOW: FEE, IS \$51.25  Due BY Segiptionest 78, 2004  FILE NOW: FEE, IS \$51.25  Due BY Segiptionest 78, 2004  FILE NOW: FEE, IS \$51.25  Due BY Segiptionest 78, 2004  FILE NOW: FEE, IS \$51.25  Due BY Segiptionest 78, 2004  FILE NOW: FEE, IS \$61.25  Due BY Segiptionest 78, 2004  FILE NOW: FEE, IS \$61.25  Due BY Segiptionest 78, 2004  FILE NOW: FEE, IS \$61.25  FILE NOW: FEE, IS \$61.25  Due BY Segiptionest 78, 2004  FILE NOW: FEE, IS \$61.25  FILE NOW: FEE, IS \$61.25  FILE NOW: FEE, IS \$61.25  Due BY Segiptionest 78, 2004  FILE NOW: FEE, IS \$61.25  FILE NOW: FEE, IS \$61	GREGORY, WAYNE H 204 NW 2ND ST  HAVANA FL 32303  City  FL Zip Code  8. 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. I am familiar with, and act the obligations of registered agent.  SIGNATURE  Signature, typed or perited name of registered agent and site of applicable.  PNOTE: Registered Agent expressive required when remaining)  DATE  FILE NOW: FEE: IS 361:25  9. Election Campaign Financing Trust Fund Contribution.  DATE  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE NAME SIRET ADDRESS  SIRET ADDRESS  SIRET ADDRESS		6. Name and Address of Curre	nt Registered Agent			7. Name and Ad	dress of New Re		
204 NW 2ND ST HAVANA FL 32303    City	City	City  City  FL  Zip Code  8. 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. I am familiar with, and acceptable of the obligations of registered agent.  SIGNATURE  Signature, typed or purpled name of registered agent and sine if applicable.  (INOTE: Registered Agent signature required when remaining)  FILE NOW: FEE IS \$51.25  9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees  Florida: Department of State  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE  P, T  GREGORY, WAYNE H  SIREET ADDRESS  SIREET ADDRESS  SIREET ADDRESS					Name				
8. 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. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  SIGNATURE  Symum. speed or ormet name or registered signature or the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  PLE NOW: FEE. IS \$61.25  Due By September 7, 2004  PLECTOR Compasign Financing Due By September 7, 2004  Thus Fund Contribution.  The NOW PEE. IS \$61.25  Due By September 7, 2004  Thus Fund Contribution.  The NOW NOW PEE. IS \$61.25  Due By September 7, 2004  Thus Fund Contribution.  The NOW NOW PEE. IS \$61.25  Due By September 7, 2004  Thus Fund Contribution.  The NOW NOW PEE. IS \$61.25  Due By September 7, 2004  Thus Fund Contribution.  The NOW NOW PEE. IS \$61.25  Due By September 7, 2004  Thus Fund Contribution.  The NOW NOW PEE. IS \$61.25  Due By September 7, 2004  Thus Fund Contribution.  The NOW NOW PEE. IS \$61.25  Due By September 7, 2004  Thus Fund Contribution.  The NOW NOW PEE. IS \$61.25  Due By September 7, 2004  Thus Fund Contribution.  The NOW PEE. NOW PEE. IS \$61.25  Due By September 7, 2004  Thus Fund Contribution.  The NOW PEE. IS \$61.25  Due By September 7, 2004  Thus Fund Contribution.  The NOW PEE. NOW PEE. IS \$61.25  Due By September 7, 2004  Thus Fund Contribution.  The NOW PEE. NOW PEE. IS \$61.25  Due By September 7, 2004  Thus Fund Contribution.  The NOW PEE. NOW PEE. IS \$61.25  Due By September 7, 2004  Thus Fund Contribution.  DATE Make Check Payable to Thus Per Per Pee. Pee. Pee. Pee. Pee. Pee. P	Either above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  SIGNATUR	City  FL Zip Code  8. 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. I am familiar with, and acceptable of registered agent.  SIGNATURE  Signature, typed or printed name of registered agent and size of applicable.  (NOTE: Registered Agent agent and registered agent and size of applicable.  (NOTE: Registered Agent agent of registered agent and size of applicable.  (NOTE: Registered Agent agent of registered agent and size of applicable.  (NOTE: Registered Agent agent of registered agent, or both, in the State of Florida. I am familiar with, and acceptable of registered agent, or both, in the State of Florida. I am familiar with, and acceptable of registered agent.  Signature, typed or printed name of registered agent and size of Florida. I am familiar with, and acceptable of registered agent, or both, in the State of Florida. I am familiar with, and acceptable of registered agent, or both, in the State of Florida. I am familiar with, and acceptable of registered agent, or both, in the State of Florida. I am familiar with, and acceptable of registered agent, or both, in the State of Florida. I am familiar with, and acceptable of registered agent, or both, in the State of Florida. I am familiar with, and acceptable of registered agent, or both, in the State of Florida. I am familiar with, and acceptable of registered agent, or both, in the State of Florida. I am familiar with, and acceptable of registered agent, or both, in the State of Florida. I am familiar with, and acceptable of registered agent, or both, in the State of Florida. I am familiar with, and acceptable of registered agent, or both, in the State of Florida. I am familiar with, and acceptable of registered agent, or both in the State of Florida. I am familiar with, and acceptable of registered agent, or both in the State of Florida agent, or both in the State of Florida agent, or both, and acceptable of Florida agent agent agent agent agent agent a	204	4 NW 2ND ST		- =	Street Addres	s (P.O. Box Number is	Not Acceptable)	, , , , , , , , , , , , , , , , , , ,	
B. 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. I am familiar with, and accept ne obligations of registered agent.  SIGNATURE  Signature  Signature  Signature  Signature  Signature  OPTICE IS \$61.25  Due By September 2004.  P. T.  OPTICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OPTICERS AND DIRECTORS IN 10  TITLE NOW:  FEE: IS \$61.25  Due By September 2004.  P. T.  GREGORY, WAYNE H  SIRET ADDRESS  CITY-S1-72  TITLE  NOW:  SIRET ADDRESS  CITY-S1-72  TO Change  Delete  MAKE  SIRET ADDRESS  CITY-S1-72  TO Change  Addition  SIRET ADDRESS  CITY-S1-72  TITLE  NOW:  SIRET ADDRESS  CITY-S1-72  TO Change  Addition  Addition  Change  Addition  Addition  Change  Addition  Addition  Addition  Addition  Addition  SIRET ADDRESS  CITY-S1-72  TITLE  NOW:  SIRET ADDRESS  CITY-S1-72  TITLE  TITLE  SIRET ADDRESS  CITY-S1-72  TITLE  TITLE  SIRET ADDRESS  CITY-S1-72  TITLE  T	B. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  SUBMAN horsel or surried name of registered spens for its 4 securities.  PATE: Registered Agent registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  PATE: Registered Agent registered agent in the state of Florida. I am familiar with, and accept the obligations of registered agent.  PATE: NOW: FEE: IS \$41.25  SIGNATURE  SUBMAN horsel or surried name of registered spens for its 4 securities.  PATE: NOW: FEE: IS \$41.25  SIGNATURE  SUBMAN horsel or surried name of registered spens for its 4 securities.  PATE: NOW: FEE: IS \$41.25  SIGNATURE  SUBMAN horsel or surried name of registered spens for its 4 securities.  PATE: NOW: FEE: IS \$41.25  SIGNATURE  SUBMAN horsel or surried name of registered spens for its 4 securities.  PATE: NOW: FEE: IS \$41.25  SIGNATURE  SUBMAN horsel or surried name of registered spens for its 4 securities.  SIGNATURE: Specific name of the surried name of registered agent, or both, in the State of Florida. I am familiar with, and accept registered agent, or both, in the surried name of registered agent, or both, in the State of Florida. I am familiar with, and accept registered agent, or both, in the State of Florida. I am familiar with, and accept registered agent, or both, in the surried name of registered agent, or both, in the surried name of registered agent, or both, in the surried name of registered agent, or both, in the surried name of registered agent, or both, in the surried name of registered agent, or both, in the surried name of registered agent, or both, in the surried name of registered agent registered agent registered surries agent results as surried name of registered agent registered agent results as surried name of registered agent registered agent results as surried name of registered agent regis	8. 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. I am familiar with, and acceptable of registered agent.  SIGNATURE  Signature, typed or united name of registered agent and site if applicable.  [NOTE: Registered Agent agreeting treatives when remaining]  PLE NOW: FEE IS \$61.25  9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees Florida Department of State  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE  P, T  GREGORY, WAYNE H  SIRRET ADDRESS  204 NW 2ND ST  STREET ADDRESS  STREET ADDRESS	ПА	14MINA FL 32303 *				-			·
The obligations of registered agent.  SIGNATURE  Signature Test is \$61.25  PLE NOW: FEE: IS \$61.25  Due, By Segliane Test 2004  Trust Fund Contribution.  Trust Fund Contribution.  Die, By Segliane Test 2004  Trust Fund Contribution.  Die, By Segliane Test 2005  Trust Fund Contribution.  Die, By Segliane Test 2006  Trust Fund Contribution.  Die, By Segliane Test 2006  Trust Fund Contribution.  Die, Addition State  Trust Fund Contribution.  Die, By Segliane Test 2006  Trust Fund Contribution.  Die, By Segliane Test 2006  Trust Fund Contribution.  Die, By Segliane Test 2006  Trust Fund Contribution.  Die, Addition State  Trust Fund Contribution.  Die, Addition State  Trust Fund Contribution.  Die, By Segliane Test 2006  Trust Fund Contribution	The obligations of registered agent.    Signal	the obligations of registered agent.  SIGNATURE  Signature, typed or printed name of registered agent and site # applicable. (NOTE: Registered Agent agreed agent	_	•			City	•		. FL Zip Coo	de
TILE   P, T   Delete   TITLE   GREGORY, WAYNE H   GREGORY, WAYNE H   STRET ADDRESS   CITY-SI-ZP   HAVANA FL 32333   CITY-SI-ZP   HAVANA FL 32333   CITY-SI-ZP	TITLE   P, T	TITLE P, T Delete TITLE Change Ad  NAME GREGORY, WAYNE H  STREET ADDRESS 204 NW 2ND ST STREET ADDRESS			A STORY			erad when reinsteadig)		Caro Maria Ver	
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	indicated on 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 of the corporation of the receiver of trustee empowered to execute this report as required by Change 617. Florida Statutes, and that my page appears in Block 10 or Block 11 if	CHI-21-7h   CHI-21-5h	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	P, T GREGORY, WAYNE H 204 NW 2ND ST HAVANA FL 32333  VP RODBY, DEBORAH A 705-8 POINTE CT. TALLAHASSEE, FL 32308  S WHITNEY, LE 100 CALL ST. TALLAHASSEE FL 32308	9. Electic Trust F  Delete  Delete  Delete  Delete	On Campaign Fin Fund Contribution  11.  e TITLE NAME STREET CITY-S	T ADDRESS ST-ZP  I ADDRESS ST-ZP  I ADDRESS T-ZP  I ADDRESS T-ZP  I ADDRESS T-ZP	\$5.00 May Be Added to Fees	Florid	e Check Payable a Department of S AND DIRECTORS II Change Change Change	State  10 Addition Addition Addition Addition