Signature typed or primed name of registred appendiation and line if applicable (NOTE: Registred Appendignation regulated Appendignated Appendignation regulated Appendignation	NC	ONPROFIT	IOW: FILING F	•			FILE 1007		ിറച
1997 DV/SION OF COMPORTIONS CQUMENT # NO9469 (0) PLZA PARK CONDOMINUM ASSOCIATION. INC. Status To FROH RAX RP Maing Address Color And Status Color Battery J FRCH 22 P AX DS Maing Address Color Battery J FRCH 22 P AX DS Maing Address Color Battery J FRCH 22 P AX DS Maing Address Color Battery J FRCH 22 P AX DS Maing Address Color Battery Address Three address Color Battery Address Country State Adl 4, etc. Country State Adl 4, etc. Country Country R Name and Address of Current Registered Agent R Name and Address of Current Registered Agent PERCH, BARY J L ES State Adl 4, etc. ES State Adl 4, etc. ES State Adl 4, etc. EA									
PLAZA PARK CONDOMINIUM ASSOCIATION, INC. uppel Prace of Business Mating Address LABARY J. PERCH INCA DR. H. C.D. BARRY J. PERCH INCA DR. H. LABARY J. PERCH INCA DR. H. C.D. BARRY J. PERCH INCA DR. H. LABARY J. PERCH INCA DR. H. C.D. BARRY J. PERCH INCA DR. H. LABARY J. PERCH INCA DR. H. Date Insportation of Dualitiest INCA DR. H. Date Insportation of Business Mating Address Date Insportation of Business A. Moning Address Date Insportation of Business Intel Mathies R. 333864009 State April A, etc. Explorition April A, etc. EVY & State Explorition April A						Secret	ary	of S	state
PLAZA PARK CONDOMINIUM ASSOCIATION, INC. uppel Prace of Business Mating Address LABARY J. PERCH INCA DR. H. C.D. BARRY J. PERCH INCA DR. H. LABARY J. PERCH INCA DR. H. C.D. BARRY J. PERCH INCA DR. H. LABARY J. PERCH INCA DR. H. C.D. BARRY J. PERCH INCA DR. H. LABARY J. PERCH INCA DR. H. Date Insportation of Dualitiest INCA DR. H. Date Insportation of Business Mating Address Date Insportation of Business A. Moning Address Date Insportation of Business Intel Mathies R. 333864009 State April A, etc. Explorition April A, etc. EVY & State Explorition April A	OCU		N09469	(0)	····				
Open Park / PERCH RUAD DR COD Bark / PERCH Z2 RUAD RR COD Bark / PERCH Z2 RUAD RR COD Bark / PERCH Z2 RUAD RR Data Inconcerptod of Qualified Se. Data pf Les Report 06/15/15/85 Principal Place of Business 2.8. Mailing Address 4. FEI NUTCH C6/22/1685 3. Data Inconcerptod of Qualified Se. Data pf Les Report 06/15/15/85 Setter, Apt #, do Satter, Apt #, etc. 6. Certificate of Status Dasind Fe. Required Fe. Required Fe. Required Fe. Required City & State City & State Country 9. Data Inconcerciption and the rest Required Fe. Required State, Apt #, etc. Fe. Required State, Apt #, etc. City & State City & State Country P. The concerciption has fability for langable for under =. 190.052, Printid States Control Country State, Apt #, etc. Fe. Required State, Apt #, etc. Zity & State Country P. The concerciption table for under =. 190.052, Printid States App # State, App # State, App # State, App # Zity Acad Res of Current Registered Agent 10. Name and Address of Under & State, App # State, App # State, App # State, App # EERCH, BARRY J. EERCH, BARRY J. EERCH, BARRY J. EERCH, BARRY J. State, App # State,			MINIUM ASSOCIAT	TION, INC.					
Open Park / PERCH RUAD DR COD Bark / PERCH Z2 RUAD RR COD Bark / PERCH Z2 RUAD RR COD Bark / PERCH Z2 RUAD RR Data Inconcerptod of Qualified Se. Data pf Les Report 06/15/15/85 Principal Place of Business 2.8. Mailing Address 4. FEI NUTCH C6/22/1685 3. Data Inconcerptod of Qualified Se. Data pf Les Report 06/15/15/85 Setter, Apt #, do Satter, Apt #, etc. 6. Certificate of Status Dasind Fe. Required Fe. Required Fe. Required Fe. Required City & State City & State Country 9. Data Inconcerciption and the rest Required Fe. Required State, Apt #, etc. Fe. Required State, Apt #, etc. City & State City & State Country P. The concerciption has fability for langable for under =. 190.052, Printid States Control Country State, Apt #, etc. Fe. Required State, Apt #, etc. Zity & State Country P. The concerciption table for under =. 190.052, Printid States App # State, App # State, App # State, App # Zity Acad Res of Current Registered Agent 10. Name and Address of Under & State, App # State, App # State, App # State, App # EERCH, BARRY J. EERCH, BARRY J. EERCH, BARRY J. EERCH, BARRY J. State, App # State,									
PLAD, DR. 22 PLAZ AR. IGH ADRES FL. 33936 IEHCHA ADRES FL. 33936-6019 Philing Address 2. Maling Address Produpial Place of Business 2. Maling Address Suite Apt: #. dic Suite. Apt: #. dic. State City & State City & State City & State State Apt: #. dic State Apt: #. dic. Page Country Page				•		A KARALEKER KELANJAN ENHIL AINEM KI	IR JANI AHAYI RIAN	I ATTAL ALALI A	114)) 410)) 100)
	PLAZA DR	٦.	222	PLAZA DR.	6018	3 Data loggraphical or Qualified	2. Dot	al of D	
Suite Apt #, etc. Suite Apt #, etc. 21 City & State 21 City & State 22 City & State 23 City & State 23 City & State 24 City & State 23 City & State 24 Country 21 State App # 23 Country 24 State App # 23 Country 24 State App # 24 Country 25 State App # 24 Country 25 State App # 24 State App # 25 State App # 26 State App # 27 State App # 28 State						05/28/1985		6/13/19	96
Suite. Apt. #, elc. Suite. Apt. #, elc. 21 S. Contribute to Status Desired \$6.75 Additional Chy & State 20 Cloy & State 8. Contribute to Status Desired \$5.00 May Be Zhp Country 21 Country 8. This corporation has tability to intrangule age. \$5.00 May Be Zhp Country 21 Country 8. This corporation has tability to intrangule age. Yes Addites	Principal P	Place of Business		Mailing Address		4. FEI Number NOT APPLICABLE		*******	
City & State City	Suite, Apt.	. #, etc.		Suite, Apt. #, etc.		······			
Zip Zip Country B This coprotein has libility for intangible fax unders a. 190.032, Ploide Statutes B Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 10. Name and Address of New Registered Agent PERCH, BARRY J. 222 PLAZA DRIVE 81 Name 82 LEHIGH ACRES FL 33936 83 84 Street Address of New Registered Agent Parsuant to the provisions of Sections 617.0502 and 617.1508. Forida Statutes, the above named corporation's board of directors. I hereby accept the appointment as registered agent, i ant hanning twit, and acceptable. Parsuant to the provisions of Sections 617.0502 and 617.1508. Forida Statutes, the above named corporation's board of directors. I hereby accept the appointment as registered agent, i and hanning twit, and acceptable. Registered agent, and hanning twit, and acceptable to obligations obligation agent and that registered agent. Section 517.0508. Forida Statutes are address. Intel Section 178.007FICERS AND DIRECTORS IN 12. OFFICERS AND DIRECTORS 13. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12. OFFICERS AND DIRECTORS 13. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12. OFFICERS AND DIRECTORS IN 12. OBLETE 11.111 Intel as the section and agent and the approximant as registered agent. Street Address FL OBLETE 13. ADDITIONSI	City & Stat	10		City & State		, , , ,	<u> </u>	\$5.00	May Be
S. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 122 PLAZA DRIVE 1222 PLAZA DRIVE 1222 PLAZA DRIVE 1222 PLAZA DRIVE 123 Street Address (P.O. Box Number is Not Acceptable) 12 12 Street Address (P.O. Box Number is Not Acceptable) 12 12 Street Address (P.O. Box Number is Not Acceptable) 12 12 Street Address (P.O. Box Number is Not Acceptable) 12 12 Street Address (P.O. Box Number is Not Acceptable) 12 12 Street Address (P.O. Box Number is Not Acceptable) 12 12 Street Address (P.O. Box Number is Not Acceptable) 12 12 Street Address (P.O. Box Number is Not Acceptable) 12 12 Street Address 13 Street Address 14 Ctrl 12 S	Zip		ntry	Zip		8. This corporation has liability fo		ax under s	******
PERCH, BARRY J. 222 PLAZA DRVE LEHIGH ACRES FL 33936 Bitreet Address (P.O. Box Number is Not Acceptable) 91 Otty 92 Otty 93 Otty 94 Otty 95 Otty 96 Otty 97 Otty 98 Otty 99 Otty 99 Otty 90 Otty 91 Otty 92 Otty 93 Otty 94 Otty 94 Otty 95 Otty 94 Otty 95 Otty 94 Otty 95 Otty 94 Otty 95 Otty 94 Otty <tr< td=""><td></td><td></td><td></td><td>ered Agent</td><td>30</td><td></td><td></td><td></td><td></td></tr<>				ered Agent	30				
222 PLACA DRIVE LEHIGH ACRES FL 33936 Image: Control to the provisions of Sections 617,0502 and 617,1508. Florids Statutes, the borker name dispersion submits this statement for the purpose of changing its registered agent, i and maintains with, and accept the obligations of Section 617,0502 and 617,1508. Florids Statutes, the corporation submits this statement for the approximatel as registered agent, i and maintains with, and accept the obligations of Section 617,0502. Florids Statutes, the corporation submits this statement for the approximatel as registered agent, i and maintains with, and accept the obligations of Section 617,0503. Florids Statutes, the corporation submits this statement for the approximatel as registered agent, i and maintains with, and accept the obligations of Section 617,0502. Florids Statutes, the corporation submits the statement for the approximatel as registered agent and the information accept the obligation of Section 617,0502. Florids Statutes, the corporation submits the statement for the approximatel as registered agent and and the information accept the obligation of Section 617,0502. Florids Statutes, the corporation submits the statement for the approximatel as registered agent and accept the obligation of Section 617,0502. Florids Statutes, the approximatel as registered agent and accept the obligation of Section 617,0502. Florids Statutes, the approximatel approxima					81 Name		··· · · · · · · · · · · · · · · · · ·	e	
LEHIGH ACRES FL 33936 Image: statutes in the provisions of Sections 617.0502 and 617.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I tain tamiliar with, and accept the obligations of, Section 617.0502, Florida Statutes, the above-named corporation boothing the sector agent, and the oppontument are registered agent. I tain tamiliar with, and accept the obligations of, Section 617.0502, Florida Statutes, the above-named corporation's Doordin's Doord					82 Street Add	Iress (P.O. Box Number is Not Accepta	able)		*
					83				
Pursuant to the provisions of Stoclions 617.0502 and 617.1508. Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and analysis of the status of the status of change is the status of the purpose of change is the status of the purpose of change is the status of the stat									
Image: DP DELETE 1.1 TITLE Image: Deletere Addition E1 ADDRESS 222 PLAZA DR 1.3 STREET ADDRESS 1.3 STREET ADDRESS S1: AP LEHIGH ACRES FL 1.3 STREET ADDRESS 1.4 GITN-S1: AP E1 ADDRESS 220 PLAZA DR 1.3 STREET ADDRESS 1.4 GITN-S1: AP E1 ADDRESS 1.3 STREET ADDRESS 2.3 STREET ADDRESS 1.4 GITN-S1: AP E1 ADDRESS 1.3 STREET ADDRESS 2.3 STREET ADDRESS 1.4 GITN-S1: AP E1 ADDRESS 1.3 STREET ADDRESS 2.4 GITN-S1: AP 1.4 GITN-S1: AP E1 ADDRESS 1.3 STREET ADDRESS 2.4 GITN-S1: AP 1.4 GITN-S1: AP E1 ADDRESS 20 CONNECTICUT RD. 3.3 STREET ADDRESS 1.4 GITN-S1: AP E1 ADDRESS 20 CONNECTICUT RD. 3.3 STREET ADDRESS 1.4 GITN-S1: AP E1 ADDRESS 2.4 GITN-S1: AP 1.4 GITN-S1: AP 1.4 Additic E1 ADDRESS 1.5 AP 1.5 AP 1.5 AP 1.4 GITN-S1: AP E1 ADDRESS 2.5 AP 1.5 AP 1.5 AP 1.5 AP 1.5 AP E1 ADDRESS 5.5 GITN 1.5 AP 1.5 AP 1.5 AP 1.5 AP 1.5 AP 1.5	Pursuant office or i	to the provisions of S registered agent, or b	ections 617.0502 and 61 oth, in the State of Florid	7.1508, Florida Statute a. Such change was a Social 6170620, Flo		poration submits this statement for the tion's board of directors. I hereby acc			
E E DELMAN, LEONARD B. EST-20P LEHIGH ACRES FL 12 MAKE ST-20P LEHIGH ACRES FL 14 (ITY-ST-20P Change Addition of the second of			ame of registered agent and title if	f applicable. (NOT	es, the above-named cor authorized by the corpora prida Statutes.	vired when reinstating)	purpose of c apt the appoi	hanging It intment as	s registere registered
str.2iP LEHIGH ACRES FL 14 CITY-S1-2iP E D DELETE 21 TITLE E1 ADDRESS 33 STREET ADDRESS 23 STREET ADDRESS S12-2P LEHIGH ACRES FL 24 CITY-S1-2iP E D DELETE 31 TITLE E BATEMAN, SHIRLEE 32 NAME S1-2P LEHIGH ACRES FL 33 STREET ADDRESS S1-2P LEHIGH ACRES FL 34 CITY-S1-2iP E1 ADDRESS 20 CONNECTICUT RD. 33 STREET ADDRESS S1-2P LEHIGH ACRES FL 34 CITY-S1-2iP E1 ADDRESS	inature	Signature typed or printed n	ame of registered agent and title if	tappicable. (NOTI TORS	es, the above-named cor authorized by the corpora orida Statutes. E: Registered Agent signature requ 13.	vired when reinstating)	purpose of c apt the appoint DATE	phanging It intment as	s registered registered
Image: Display statute Deleter 21 time Image: Deleter Addition E EDELMAN, LEONARD B. 23 Street Appress 23 Street Appress Image: Deleter Addition Str.2iP LEHIGH ACRES FL 2.4 ctrv-str.2iP Image: Deleter District	INATURE	Signature typed or printed n	ame of registered agent and title if OFFICERS AND DIREC	tappicable. (NOTI TORS	es, the above-named cor authorized by the corpore orida Statutes. E: Registered Agent signature requ 13. 1.1 TiTLE	vired when reinstating)	purpose of c apt the appoint DATE	phanging It intment as	s registere registered IS IN 12
E EDELMAN, LEONARD B. ET ADDRESS SIT-ZIP LEHIGH ACRES FL 2 MAVE 2	ET ADDRESS	Signature typed or printed in DP PERCH, BARRY 222 PLAZA DR.	ame of registered agent and title if OFFICERS AND DIREC	tappicable. (NOTI TORS	es, the above-named cor authorized by the corpora prida Statutes. E: Registered Agent signature requ 13. 1.1 TiTLE 1.2 NAME	vired when reinstating)	purpose of c apt the appoint DATE	phanging It intment as	s registere registered IS IN 12
ET ADDRESS ST-ZIP LEHIGH ACRES FL 23 STREET ADDRESS ST-ZIP LEHIGH ACRES FL 24 CITY-ST-ZP C C C C C C C C C C C C C C C C C C C	ENATURE	Signature typed or printed in DP PERCH, BARRY 222 PLAZA DR. LEHIGH ACRES	ame of registered agent and title if OFFICERS AND DIREC	f eppicable. (NOTE TORS	es, the above-named cor authorized by the corpora prida Statutes. E: Registered Agent signature required 13. 1.1 TiTLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	vired when reinstating)	DUPPOSE OF C Popt the appoint DATE ICERS AND I	hanging It intment as DIRECTOR	s registered registered IS IN 12
D DELETE 3.1 TITLE Change Addition E BATEMAN, SHIRLEE 3.2 MAME 3.3 STREET ADDRESS	E E ADDRESS	Signature typed or printed in DP PERCH, BARRY 222 PLAZA DR. LEHIGH ACRES D	ame of registered agent and bite it OFFICERS AND DIREC J.	f eppicable. (NOTE TORS	es, the above-named cor authorized by the corpora prida Statutes. E: Registered Agent signature required 13. 1.1 TiTLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE	vired when reinstating)	DUPPOSE OF C Popt the appoint DATE ICERS AND I	hanging It intment as DIRECTOR	s registered registered IS IN 12
E BATEMAN, SHIRLEE 32 NAME 20 CONNECTICUT RD. 33 STRET ADDRESS ST-2IP LEHIGH ACRES FL Image: DELETE 41 ITTLE 4 CITY-ST-2IP ET ADDRESS ST-2IP Image: DELETE 4 CITY-ST-2IP Image: DELETE 4 CITY-ST-2IP Image: DELETE 4 CITY-ST-2IP Image: DELETE 1 DELETE <td>E E E E ST-ZIP E</td> <td>Signature typed or printed in DP PERCH, BARRY 222 PLAZA DR. LEHIGH ACRES D EDELMAN, LEO</td> <td>ame of registered agent and bite it OFFICERS AND DIREC J.</td> <td>f eppicable. (NOTE TORS</td> <td>E: Registered Agent signature required for the corpore statutes. E: Registered Agent signature required for the corpore statutes.</td> <td>vired when reinstating)</td> <td>DUPPOSE OF C Popt the appoint DATE ICERS AND I</td> <td>hanging It intment as DIRECTOR</td> <td>s registered registered IS IN 12</td>	E E E E ST-ZIP E	Signature typed or printed in DP PERCH, BARRY 222 PLAZA DR. LEHIGH ACRES D EDELMAN, LEO	ame of registered agent and bite it OFFICERS AND DIREC J.	f eppicable. (NOTE TORS	E: Registered Agent signature required for the corpore statutes. E: Registered Agent signature required for the corpore statutes.	vired when reinstating)	DUPPOSE OF C Popt the appoint DATE ICERS AND I	hanging It intment as DIRECTOR	s registered registered IS IN 12
ET ADDRESS 20 CONNECTICUT RD. 33 STREET ADDRESS 51-2IP LEHIGH ACRES FL 34 CITY-ST-2IP CE ET ADDRESS 51-2IP CE ET ADDRES 51-2IP CE ET AD	NATURE E E E ADDRESS - ST- ZIP E E ADDRESS - ST- ZIP	Signature typed or printed in DP PERCH, BARRY 222 PLAZA DR. LEHIGH ACRES D EDELMAN, LEO 130 LEE BLVD. LEHIGH ACRES	ame of registered agent and life i OFFICERS AND DIREC J. FL.	1 eppi-ceble. (NOTE TORS DELETE	E: Registered Agent signature required a Statutes. E: Registered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	vired when reinstating)	purpose of c ept the appoint care ICERS AND I	DIRECTOR	s registered registered IS IN 12
-ST-2IP LEHIGH ACRES FL 34 CITY-ST-2IP E DELETE 41 TITLE Change Addition E 43 STREET ADDRESS 43 STREET ADDRESS 44 CITY-ST-2IP ST-ZIP 44 CITY-ST-2IP Change Addition E DELETE 51 TITLE Change Addition E DELETE 51 TITLE Change Addition E ST-ZIP Addition ST-ZIP Addition E ST-ZIP ST-ZIP Change Addition E ST-ZIP ST-ZIP ST-ZIP ST-ZIP Change Addition I do norest ST-ZIP	NATURE E Et ADDRESS ST-ZIP E ET ADDRESS - ST-ZIP	Signature typed or printed in DP PERCH, BARRY 222 PLAZA DR. LEHIGH ACRES D EDELMAN, LEO 130 LEE BLVD. LEHIGH ACRES D	arre of registered agent and title it OFFICERS AND DIREC 'J. FL. NARD B.	1 eppi-cebie. (NOTE TORS DELETE	E: Registered Agent signature required as the corporation of the corpo	vired when reinstating)	purpose of c opt the appoint DATE ICERS AND I	DIRECTOR	s registered registered IS IN 12
E 4.2 NAME ET ADDRESS 4.3 STREET ADDRESS .ST-ZIP 4.4 CITY-ST-ZIP Image: DELETE 5.1 TITLE Image: DELETE 6.1 STITLE	NATURE E E1 ADDRESS - ST- ZIP E E1 ADDRESS - ST- ZIP E E	DP PERCH, BARRY 222 PLAZA DR. LEHIGH ACRES D EDELMAN, LEO 130 LEE BLVD. LEHIGH ACRES D BATEMAN, SHI	arre of registered agent and title it OFFICERS AND DIREC ' J. 6 FL NARD B. 6 FL RLEE	1 eppi-cebie. (NOTE TORS DELETE	es, the above-named cor authorized by the corpora prida Statutes. E: Registered Agent signature required 13. 1.1 TiTLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME	vired when reinstating)	purpose of c opt the appoint DATE ICERS AND I	DIRECTOR	s registered registered IS IN 12
ET ADDRESS 43 STREET ADDRESS _ST-ZIP 44 CITY-ST-ZIP	E E ET ADDRESS - ST-ZIP E E E E E E E E E E E E E E E E E E E	DP PERCH, BARRY 222 PLAZA DR. LEHIGH ACRES D EDELMAN, LEO 130 LEE BLVD. LEHIGH ACRES D BATEMAN, SHI 20 CONNECTIO	arne of registered agent and title it OFFICERS AND DIREC 3 J. 6 FL INARD B. 6 FL RLEE CUT RD.	1 eppi-cebie. (NOTE TORS DELETE	es, the above-named cor authorized by the corpore prida Statutes. E: Registered Agent signature required 13. 1.1 TiTLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS	vired when reinstating)	purpose of c opt the appoint DATE ICERS AND I	DIRECTOR	s registered registered IS IN 12
-ST-ZIP 44 CITY-ST-ZIP 44 CITY-ST-ZIP DELETE 51 TITLE Change Additio 52 NAME 53 STREET ADDRESS 51 ZIP 54 CITY-ST-ZIP 54 CITY-ST-ZIP Change Additio E F1 ADDRESS 51 ZIP 54 CITY-ST-ZIP 55 CITY-ST-ZIP 5	INATURE E E E1 ADDRESS - ST - ZIP E E E E E E ADDRESS - ST - ZIP E E E T ADDRESS - ST - ZIP	DP PERCH, BARRY 222 PLAZA DR. LEHIGH ACRES D EDELMAN, LEO 130 LEE BLVD. LEHIGH ACRES D BATEMAN, SHI 20 CONNECTIO	arne of registered agent and title it OFFICERS AND DIREC 3 J. 6 FL INARD B. 6 FL RLEE CUT RD.	¹ eppi-cable. (NOTE TORS DELETE DELETE	es, the above-named cor authorized by the corpore prida Statutes. E: Registered Agent signature required 13. 1.1 TiTLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	vired when reinstating)	purpose of c opt the appoint DATE ICERS AND I	DIRECTOR Change	s registered registered IS IN 12 Additio
Image: Delette 5.1 Title Image: Delette Change Addition E 52 NAME 53 Street ADDRESS 53 Street ADDRESS ST-ZIP 54 CITY-ST-ZIP 54 CITY-ST-ZIP Image: Delette 6.1 Title Image: Delette E 0 DELETE 6.1 Title Image: Delette 6.1 Title Image: Delette E 6.2 NAME 6.3 Street ADDRESS ST-ZIP 6.3 Street ADDRESS 6.3 Street ADDRESS ST-ZIP 6.3 Street ADDRESS 6.4 CITY-ST-ZIP I do 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 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 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 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 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 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 supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Flo	NATURE E E ET ADDRESS - ST- ZIP E E E ADDRESS - ST- ZIP E E ADDRESS - ST- ZIP E E E ADDRESS - ST- ZIP E E	DP PERCH, BARRY 222 PLAZA DR. LEHIGH ACRES D EDELMAN, LEO 130 LEE BLVD. LEHIGH ACRES D BATEMAN, SHI 20 CONNECTIO	arne of registered agent and title it OFFICERS AND DIREC 3 J. 6 FL INARD B. 6 FL RLEE CUT RD.	¹ eppi-cable. (NOTE TORS DELETE DELETE	es, the above-named cor authorized by the corpore prida Statutes. E: Registered Agent signature required 13. 1.1 TiTLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME	vired when reinstating)	purpose of c opt the appoint DATE ICERS AND I	DIRECTOR Change	s registered registered IS IN 12 Additio
E 52 NAME ET ADDRESS 53 STREET ADDRESS -ST-ZIP 54 CITY-ST-ZIP IDELETE 61 TITLE 62 NAME 62 NAME 62 NAME 63 STREET ADDRESS ST-ZIP 63 STREET ADDRESS 63 STREET ADDRESS 63 STREET ADDRESS ST-ZIP 64 CITY-ST-ZIP I do 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 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 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 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 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 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 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 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 supplied with the information stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information supplice a	NATURE E E ET ADDRESS - ST - ZIP E ET ADDRESS - ST - ZIP E E ET ADDRESS E E ET ADDRESS	DP PERCH, BARRY 222 PLAZA DR. LEHIGH ACRES D EDELMAN, LEO 130 LEE BLVD. LEHIGH ACRES D BATEMAN, SHI 20 CONNECTIO	arne of registered agent and title it OFFICERS AND DIREC 3 J. 6 FL INARD B. 6 FL RLEE CUT RD.	¹ eppi-cable. (NOTE TORS DELETE DELETE	es, the above-named cor authorized by the corpore prida Statutes. E: Registered Agent signature requined 13. 1.1 TiTLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS	vired when reinstating)	purpose of c opt the appoint DATE ICERS AND I	DIRECTOR Change	s registered registered IS IN 12 Additio
ET ADDRESS -ST-ZIP	NATURE E E ET ADDRESS -ST-ZIP E E ET ADDRESS -ST-ZIP E E ET ADDRESS -ST-ZIP E E ET ADDRESS -ST-ZIP	DP PERCH, BARRY 222 PLAZA DR. LEHIGH ACRES D EDELMAN, LEO 130 LEE BLVD. LEHIGH ACRES D BATEMAN, SHI 20 CONNECTIO	arne of registered agent and title it OFFICERS AND DIREC 3 J. 6 FL INARD B. 6 FL RLEE CUT RD.	1 appi-cable (NOTE TORS	es, the above-named cor authorized by the corpore prida Statutes. E: Registered Agent signature requined 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	vired when reinstating)	purpose of c ept the appoint DATE ICERS AND I	DIRECTOR Change	s registered registered IS IN 12 Additio
E GADDRESS ST-ZIP I do 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 indicated on this annual report or supplemental annual report is true and eccurrate and that my signature shall have the same leade effect as if made under path; the	INATURE E E E E E E E E E E E ADDRESS - ST- ZIP E E E E ADDRESS - ST- ZIP E E E T ADDRESS - ST- ZIP E E E T ADDRESS - ST- ZIP E E E T ADDRESS - ST- ZIP E E E E E E E E E E E E E E E E E E E	DP PERCH, BARRY 222 PLAZA DR. LEHIGH ACRES D EDELMAN, LEO 130 LEE BLVD. LEHIGH ACRES D BATEMAN, SHI 20 CONNECTIO	arne of registered agent and title it OFFICERS AND DIREC 3 J. 6 FL INARD B. 6 FL RLEE CUT RD.	1 appi-cable (NOTE TORS	es, the above-named cor authorized by the corpore prida Statutes. E: Registered Agent signature requined 13. 1.1 TiTLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY-ST-ZIP 5.1 TITLE	vired when reinstating)	purpose of c ept the appoint DATE ICERS AND I	DIRECTOR Change	s registered registered IS IN 12 Additio
E 62 NAME 63 STREET ADDRESS 51-ZIP 64 CITY-ST-ZIP 1 do 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 indicated on this annual report or supplemental annual report is true and that my signature shall have the same leave effect as if made under path; th	NATURE E ET ADDRESS - ST - ZIP E ET ADDRESS - ST - ZIP E ET ADDRESS - ST - ZIP E E ET ADDRESS - ST - ZIP E E	DP PERCH, BARRY 222 PLAZA DR. LEHIGH ACRES D EDELMAN, LEO 130 LEE BLVD. LEHIGH ACRES D BATEMAN, SHI 20 CONNECTIO	arne of registered agent and title it OFFICERS AND DIREC 3 J. 6 FL INARD B. 6 FL RLEE CUT RD.	1 appi-cable (NOTE TORS	es, the above-named cor authorized by the corpore prida Statutes. E: Registered Agent signature requined 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4. CITY-ST-ZIP 5.1 TITLE 5.2 NAME	vired when reinstating)	purpose of c ept the appoint DATE ICERS AND I	DIRECTOR Change	s registered registered IS IN 12 Additio
ET ADDRESS -ST-ZIP I do 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 indicated on this annual report or supplemental annual report is true and that my signature shall have the same leade effect as if made under path; th	SNATURE E E E E E E E E E E E E E E E E E E	DP PERCH, BARRY 222 PLAZA DR. LEHIGH ACRES D EDELMAN, LEO 130 LEE BLVD. LEHIGH ACRES D BATEMAN, SHI 20 CONNECTIO	arne of registered agent and title it OFFICERS AND DIREC 3 J. 6 FL INARD B. 6 FL RLEE CUT RD.	¹ eppi-cable. (NOTE TORS DELETE DELETE DELETE DELETE DELETE	es, the above-named con authorized by the corpore prida Statutes. E: Registered Agent signature requi- 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	vired when reinstating)	purpose of c ept the appoint ICERS AND I	DIRECTOR DIRECTOR Change	s registered registered IS IN 12 Additio
-ST-ZIP 1 do 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 indicated on this annual report or supplemental annual report is true and eccurate and that my signature shall have the same leave effect as if made under path; th	INATURE E E E E E E E E E E E E E E E E E E E E E E E E E E E E E E E E E E E ST-ZIP E E E ST-ZIP E E E E ST-ZIP E E ST-ZIP	DP PERCH, BARRY 222 PLAZA DR. LEHIGH ACRES D EDELMAN, LEO 130 LEE BLVD. LEHIGH ACRES D BATEMAN, SHI 20 CONNECTIO	arne of registered agent and title it OFFICERS AND DIREC 3 J. 6 FL INARD B. 6 FL RLEE CUT RD.	¹ eppi-cable. (NOTE TORS DELETE DELETE DELETE DELETE DELETE	es, the above-named con authorized by the corpore prida Statutes. E: Registered Agent signature requined 13. 1.1 Title 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4. CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE	vired when reinstating)	purpose of c ept the appoint ICERS AND I	DIRECTOR DIRECTOR Change	s registered registered IS IN 12 Additio
I do 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 indicated on this annual report or supplemental annual report is true and eccurate and that my signature shall have the same level effect as if made under path the	ENATURE E E E E E E E E E E E E E E E E E E	DP PERCH, BARRY 222 PLAZA DR. LEHIGH ACRES D EDELMAN, LEO 130 LEE BLVD. LEHIGH ACRES D BATEMAN, SHI 20 CONNECTIO	arne of registered agent and title it OFFICERS AND DIREC 3 J. 6 FL INARD B. 6 FL RLEE CUT RD.	¹ eppi-cable. (NOTE TORS DELETE DELETE DELETE DELETE DELETE	es, the above-named con authorized by the corpore prida Statutes. E: Registered Agent signature required 13. 1.1 Title 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4. CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME	vired when reinstating)	purpose of c ept the appoint ICERS AND I	DIRECTOR DIRECTOR Change	s registered registered IS IN 12 Additio
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 path the	ENATURE E E E E E E E E E E E E E E E E E E	DP PERCH, BARRY 222 PLAZA DR. LEHIGH ACRES D EDELMAN, LEO 130 LEE BLVD. LEHIGH ACRES D BATEMAN, SHI 20 CONNECTIO	arne of registered agent and title it OFFICERS AND DIREC 3 J. 6 FL INARD B. 6 FL RLEE CUT RD.	¹ eppi-cable. (NOTE TORS DELETE DELETE DELETE DELETE DELETE	es, the above-named cor authorized by the corpora prida Statutes. E: Registered Agent signature required 13. 1.1 TiTLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4. CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS	vired when reinstating)	purpose of c ept the appoint ICERS AND I	DIRECTOR DIRECTOR Change	s registered registered IS IN 12 Additio
appears in Block 12 or Block 13 if changed, or on an attachment with an address.	ENATURE E E E E E E E E E E E E E E E E E E	DP PERCH, BARRY 222 PLAZA DR. LEHIGH ACRES D EDELMAN, LEO 130 LEE BLVD. LEHIGH ACRES D BATEMAN, SHII 20 CONNECTIO LEHIGH ACRES	arre of registered agent and title if OFFICERS AND DIREC 7 J. 8 FL INARD B. 9 FL RLEE CUT RD. 9 FL		es, the above-named cor authorized by the corpora prida Statutes. E: Registered Agent signature requint 13. 1.1 TiTLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 5.4 CITY-ST-ZIP 1.1 TITLE 1.1 TITLE	d in Section 119 07/31/i) Eloride Stetu	purpose of c ept the appoint ICERS AND I	DIRECTOR DIRECTOR Change Change Change Change Change	s registered registered IS IN 12 Additio