| NO  |  | NOW: FILI   | <u> </u>  |   |  |   |  | May 1   | 3 1   | 00'                              | 7 8.1  | Mar  |
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| COR   | PORATION   | Str. St.  |   | FLORIDA DEPA<br><b>Sandra</b>   |  |   | Í  |   |   |                                  |  |  |
|   | IAL REPORT   |   |   | Secret  | ary of Stat  |   |  | Seci  | eta   | ry (                             | DI SI  | tate   |
|   | 1997   |   | <u>~</u>  |   |  |   |  |   |   |                                  |  |  |
| OCUN<br>Corporation   | NENT #   | N9500   | 00024   | 481 (8  | 9  |   |  |   |   |                                  |  |  |
| SEAWI   | NDS TOWNH  | iomes at har  | RBOR ISL/   | ands asso   | CIATIO   | N   |  |   |   |                                  |  |  |
| ncipal Place  | e of Business  |   | Mailing   | Address   |  |   |  | D TOURTURY WHEN TORED OTH   | II DENR DOM   | DD)A) DD()) D)                   | HIND DIDIT DADIT                                 | 1010) 1101 1401<br>1   |
| ALHAMBRA<br>I FLOOR   | CIRCLE   |   | - P.O. 807  | 33152   |  |   |  |   |   |                                  |  |  |
| RAL GABLES  | § FL 33134   |   |   |   |  |   | ľ  | 3. Date incorporated or 0<br>05/22/1995   | Qualified   | <b>3a</b> . Da                   | te of Last R<br>05/01/19                         | eport<br>196   |
| Principal Pl  | ace of Business  |   |   | ng Address<br>O. Box 0  | 26000  |   |  | 4. FEI Number<br>65-0648104   |   |                                  |  | plied For  |
| Suite, Apt. 1   | #, etc.  | <u> </u>  | Suite   | , Apt. #, etc.  | <u>HYYVV</u>   |   |  | 5. Certificate of Status D  | esired  | 125)                             | \$8.75 /<br>Fee Re                               | Additional   |
| City & State  | <del>}</del>   | <u></u>   | Lange Contract  | ami, FL   |  |   |  | 6. Election Campaign Fin  |   |                                  | \$5.00<br>Added 1                                | May Be   |
| Zip   |  | Country   | Zip   |   |  | intry   |  | Trust Fund Contributio<br>8. This corporation has li  | ability for i   | ntangible                        | tax under s                                      |  |
|   | 9, Name and  | Address of Current  | 29 331  |   | 30   | ſ <u></u>   |  | Florida Statutes  |   |                                  | No<br>No   |  |
|   | and the second   |   | <b>T</b>  |   |  | 81 Name   |  |   |   |                                  | - <b>T</b>                                       |  |
|   | N, DENNIS J  | 5   |   |   |  | 82 Street   | Addres   | s (P.O. Box Number is Not   | Acceptab  | vie)                             |  |  |
| - 255 ÅI H  | ацина сзназ  |   |   |   |  | <u></u>   |  |   |   |                                  |  |  |
|   | IAMBRA CIRCL<br>GABLES FL 33   |   |   |   |  | 83  |  |   |   |                                  |  |  |
|   |  |   |   |   |  | 83<br>84 City   |  | ·····   |   | <b>E</b> 1                       | <b>65</b> Zip (                                  | Code   |
| CORAL   | GABLES FL 33   | 134   | 2 and 617.150   | 08, Florida Stati   | iles, the a  | 84 City   | corpor   | ation submits this statemer   | it for the p  | FL<br>Jurgose of                 | changing it                                      | s registered   |
| Pursuant t<br>office or re<br>agent. I ar   | GABLES FL 33   | 134   | 2 and 617.150<br>of Florida. Su<br>ations of, Sect                        | )8, Florida Statu<br>ch change was<br>ion 617.0503, F   | ites, the a<br>authorize<br>lorida Sta   | 84 City   | corpor<br>poratior   | ation submits this statemer<br>n's board of directors. I her  | nt for the p<br>eby accep                                 | urnose of                        | changing it                                      | s registered   |
| CORAL<br>Pursuant t<br>office or re<br>agent. I ar<br>GNATURE   | GABLES FL 33<br>o the provisions o<br>gistered egent,<br>m familiar with, ar   | 134<br>of Sections 617.0502<br>or both, in the State of<br>accept the obliga<br>red name of registered agen   | of Florida. Su<br>ations of, Sect<br>nt and litle if applic               | ch change was<br>ion 617.0503, F<br>able. (NC   | authorize<br>lorida Sta  | 84 City   | poration   | n's board of directors. I her<br>when reinstating)  | eby accer   | DATE                             | changing it<br>pintment as                       | s registered<br>registered                                     |
| CORAL<br>Pursuant t<br>office or re<br>agent. I ar<br>SNATURE   | GABLES FL 33<br>o the provisions o<br>gistered egent,<br>m familiar with, ar   | 134<br>of Sections 617.0502<br>or both, in the State of<br>accept the obliga  | of Florida. Su<br>ations of, Sect<br>nt and litle if applic               | ch change was<br>ion 617.0503, F<br>able. (NC   | authorize<br>Iorida Sta  | <b>64</b> City<br>bove-named<br>d by the cor<br>tutes.  | poration   | n's board of directors. I her<br>when reinstating)<br>ADDITIONS/CHANGES   | eby accer   | DATE                             | changing it<br>pintment as                       | s registered<br>registered                                     |
| CORAL<br>Pursuant t<br>office or re<br>agent. 1 ar<br>SNATURE _<br>E  | GABLES FL 33<br>o the provisions o<br>gistered agent, on<br>familiar with, ar<br>Signature typed or prin<br>GETMAN, D  | 134<br>of Sections 617.0502<br>or both, in the State of<br>accept the obliga<br>ed name of registered again<br>OFFICERS AND<br>ENNIS J  | of Florida. Su<br>ations of, Sect<br>nt and litle if applic               | ch change was<br>ion 617.0503, F<br>able (NC  | authorize<br>Iorida Sta<br>TE: Registere<br>13.<br>1.1 Ti<br>1.2 N   | B4 City<br>bove-named<br>d by the corrutes.<br>d Agent signature<br>fLE<br>AME  | poratior   | n's board of directors. I her<br>when reinstating)<br>ADDITIONS/CHANGES   | eby accer   | DATE                             | changing it<br>pintment as                       | s registered<br>registered                                     |
| CORAL<br>Pursuant t<br>office or re<br>agent. 1 ar<br>BNATURE<br><br><br><br><br><br><br>   | GABLES FL 33<br>o the provisions o<br>ogistered agent, on<br>familiar with, ar<br>Signature typed or prin<br>GETMAN, D<br>255 ALHAM  | 134<br>of Sections 617.0502<br>or both, in the State of<br>of accept the obliga<br>ed name of registered agen<br>OFFICERS AND<br>ENNIS J<br>BRA CIRCLE  | of Florida. Su<br>ations of, Sect<br>nt and litle if applic               | ch change was<br>ion 617.0503, F<br>able (NC  | authorize<br>lorida Sta<br>TE: Registere<br>13.<br>1.1 Ti<br>1.2 N<br>1.3 S  | 64 City<br>Dove-named<br>d by the con-<br>tutes.<br>d Agent signature<br>TLE<br>AME<br>TREET ADDRESS  | poratior   | n's board of directors. I her<br>when reinstating)<br>ADDITIONS/CHANGES   | eby accer   | DATE                             | changing it<br>pintment as                       | s registered<br>registered                                     |
| CORAL<br>Pursuant t<br>office or re<br>agent. 1 ar<br>SNATURE<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E   | GABLES FL 33<br>o the provisions o<br>ogistered agent, on<br>familiar with, ar<br>Signature typed or prin<br>GETMAN, D<br>255 ALHAM  | 134<br>of Sections 617.0502<br>or both, in the State of<br>accept the obliga<br>ed name of registered again<br>OFFICERS AND<br>ENNIS J  | of Florida. Su<br>ations of, Sect<br>nt and litle if applic               | ch change was<br>ion 617.0503, F<br>able (NC  | authorize<br>lorida Sta<br>TE: Registere<br>13.<br>1.1 Ti<br>1.2 N<br>1.3 S  | B4 City<br>bove-named<br>d by the con<br>tutes.<br>d Agent signature<br>TLE<br>AME<br>TREET ADDRESS<br>TY-ST-ZIP  | poration<br>srequired<br>VI  | n's board of directors. I her<br>when reinstating)<br>ADDITIONS/CHANGES   | eby accer   | DATE                             | changing it<br>pintment as                       | s registered<br>registered                                     |
| CORAL<br>Pursuant t<br>office or re<br>agent. I ar<br>SNATURE _<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E  | GABLES FL 33<br>a<br>to the provisions of<br>egistered agent, of<br>m familiar with, ar<br>Signature typed or prin<br>GETMAN, D<br>255 ALHAM<br>CORAL GAE<br>D<br>KERRIGAN,  | 134<br>of Sections 617.0502<br>or both, in the State of<br>di accept the obliga<br>ed name of registered agen<br>OFFICERS AND<br>ENNIS J<br>BRA CIRCLE<br>NES FL 33134<br>JAUNITA I   | of Florida. Su<br>ations of, Sect<br>nt and litle if applic               | ch change was<br>ion 617.0503, F<br>able (NC<br>5<br>DELETE   | authorize<br>lorida Sta<br>TE: Registere<br>13.<br>1.1 Tr<br>1.2 N<br>1.3 S<br>1.4 C<br>2.1 Tr<br>2.2 N  | G4 City     Dove-named     d by the contract of the contr | poration<br>srequired<br>VI  | n's board of directors. I her<br>when reinstating)<br>ADDITIONS/CHANGES   | eby accer   | DATE                             | changing it<br>pintment as<br>DIRECTOF           | IS IN 12   |
| CORAL<br>Pursuant t<br>office or re<br>agent. I ar<br>SNATURE<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>ADDRESS<br>f-ST-ZIP<br>F<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E   | GABLES FL 33<br>a<br>to the provisions of<br>egistered agent, of<br>m familiar with, ar<br>Signature typed or prin<br>GETMAN, D<br>255 ALHAM<br>CORAL GAE<br>D<br>KERRIGAN,<br>255 ALHAM   | 134<br>of Sections 617.0502<br>or both, in the State of<br>di accept the obliga<br>ed name of registered agen<br>OFFICERS AND<br>ENNIS J<br>BRA CIRCLE<br>NES FL 33134<br>JAUNITA I<br>BRA CIRCLE   | of Florida. Su<br>ations of, Sect<br>nt and litle if applic               | ch change was<br>ion 617.0503, F<br>able (NC<br>5<br>DELETE   | authorize<br>lorida Sta<br>TE: Registere<br>13.<br>1.1 Ti<br>1.2 N<br>1.3 S<br>1.4 C<br>2.1 Ti<br>2.2 N<br>2.3 S   | GAGENT BIGHT  | poration<br>srequired<br>VI  | n's board of directors. I her<br>when reinstating)<br>ADDITIONS/CHANGES   | eby accer   | DATE                             | changing it<br>pintment as<br>DIRECTOF           | IS IN 12   |
| CORAL<br>Pursuant t<br>office or re<br>agent. I ar<br>SNATURE<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E  | GABLES FL 33<br>a<br>to the provisions of<br>egistered agent, of<br>m familiar with, ar<br>Signature typed or prin<br>D<br>GETMAN, D<br>255 ALHAM<br>CORAL GAE<br>D<br>KERRIGAN,<br>255 ALHAM<br>CORAL GAE<br>MCNA                                       | 134<br>of Sections 617.0502<br>or both, in the State of<br>of accept the obliga<br>ed name of registerial agen<br>OFFICERS AND<br>ENNIS J<br>BRA CIRCLE<br>ILES FL 33134<br>JAUNITA I<br>BRA CIRCLE<br>ILES FL 33134  | of Florida. Su<br>ations of, Sect<br>nt and litle if applic               | ch change was<br>ion 617.0503, F<br>able (NC<br>5<br>DELETE   | authorize<br>lorida Sta<br>TE: Registere<br>13.<br>1.1 Ti<br>1.2 N<br>1.3 S<br>1.4 C<br>2.1 Ti<br>2.2 N<br>2.3 S   | GAGENT AND A City     Dove-named     d by the contract of | poration<br>srequired<br>VI  | n's board of directors. I her<br>when reinstating)<br>ADDITIONS/CHANGES<br>D<br>SD  | eby accer   | DATE                             | changing it<br>pintment as<br>DIRECTOF           | IS IN 12   |
| CORAL<br>Pursuant t<br>office or re<br>agent. 1 ar<br>SNATURE<br>E<br>AE<br>EET ADDRESS<br>(-ST-ZIP<br>E<br>EET ADDRESS<br>(-ST-ZIP<br>E<br>EET ADDRESS<br>(-ST-ZIP<br>E<br>AE  | GABLES FL 33<br>a<br>to the provisions of<br>egistered agent, of<br>m familiar with, ar<br>Signature typed or prin<br>GETMAN, D<br>255 ALHAM<br>CORAL GAE<br>D<br>KERRIGAN,<br>255 ALHAM<br>CORAL GAE<br>MCNA<br>JRYRIGAN, O                             | 134<br>of Sections 617.0502<br>or both, in the State of<br>of accept the obliga<br>ed name of registered egen<br>OFFICERS AND<br>ENNIS J<br>BRA CIRCLE<br>ILES FL 33134<br>JAUNITA I<br>BRA CIRCLE<br>ILES FL 33134<br>CHARLES L  | of Florida. Su<br>ations of, Sect<br>nt and litle if applic               | ch change was<br>ion 617.0503, F<br>able (NC<br>DELETE  | authorize<br>lorida Sta<br>TE: Registere<br>13.<br>1.1 Ti<br>1.2 N<br>1.3 S<br>1.4 C<br>2.1 Ti<br>2.2 N<br>2.3 S<br>2.4 C<br>3.1 Ti<br>3.2 N   | 64 City<br>Dove-named<br>d by the con-<br>tutes.<br>d Agent signature<br>fILE<br>AME<br>TREET ADDRESS<br>ITY-ST-ZIP<br>TRE<br>TREET ADDRESS<br>ITY-ST-ZIP<br>TRE<br>AME   | Poration<br>Housen e<br>VI<br>VS<br>PI<br>MK                                     | n's board of directors. I her<br>when reinstating)<br>ADDITIONS/CHANGES<br>D<br>SD<br>SD<br>NATRY . CHARLES   | TO OFFIC  | DATE                             | Changing it<br>ointment as<br>DIRECTOF           | IS IN 12   |
| CORAL<br>Pursuant t<br>office or re<br>agent. I ar<br>SNATURE<br>E<br>E<br>AE<br>EET ADDRESS<br>(-ST-ZIP<br>E<br>EET ADDRESS<br>(-ST-ZIP<br>E<br>AE<br>EET ADDRESS  | GABLES FL 33<br>a<br>to the provisions of<br>egistered agent, of<br>m familiar with, an<br>Signature hypad or prin<br>D<br>GETMAN, D<br>265 ALHAM<br>CORAL GAE<br>D<br>KERRIGAN,<br>255 ALHAM<br>CORAL GAE<br>MCNA<br>IRYRIGAN, O<br>255 ALHAM           | 134<br>of Sections 617.0502<br>or both, in the State of<br>d accept the obliga<br>ed name of registered agen<br>OFFICERS AND<br>ENNIS J<br>BRA CIRCLE<br>BRA CIRCLE<br>BRA CIRCLE<br>LES FL 33134<br>CHARLES L<br>BRA CIRCLE  | of Florida. Su<br>ations of, Sect<br>nt and litle if applic               | ch change was<br>ion 617.0503, F<br>able (NC<br>)<br>DELETE   | authorize<br>iorida Sta<br>TE: Registere<br>13.<br>1.1 Ti<br>1.2 N<br>1.3 S<br>1.4 C<br>2.1 Ti<br>2.2 N<br>2.3 S<br>2.4 C<br>3.1 Ti<br>3.2 N<br>3.3 S  | B4     City       Dove-named     dby the control of th   | Poration<br>required<br>VI<br>VS<br>PI<br>MK<br>25                               | n's board of directors. I her<br><u>ADDITIONS/CHANGES</u><br>D<br>SD<br>SD<br>NATRY, CHARLES<br>55 AJJAMBRA CIF   | TO OFFIC  | DATE                             | Changing it<br>ointment as<br>DIRECTOF           | IS IN 12   |
| CORAL<br>Pursuant t<br>office or re<br>agent. Lar<br>GNATURE<br>.E<br>.E<br>.E<br>.E<br>.E<br>.E<br>.E<br>.E<br>.E  | GABLES FL 33<br>a<br>to the provisions of<br>egistered agent, of<br>m familiar with, an<br>Signature hypad or prin<br>D<br>GETMAN, D<br>265 ALHAM<br>CORAL GAE<br>D<br>KERRIGAN,<br>255 ALHAM<br>CORAL GAE<br>MCNA<br>IRYRIGAN, O<br>255 ALHAM           | 134<br>of Sections 617.0502<br>or both, in the State of<br>of accept the obliga<br>ed name of registered egen<br>OFFICERS AND<br>ENNIS J<br>BRA CIRCLE<br>ILES FL 33134<br>JAUNITA I<br>BRA CIRCLE<br>ILES FL 33134<br>CHARLES L  | of Florida. Su<br>ations of, Sect<br>nt and litle if applic               | ch change was<br>ion 617.0503, F<br>able (NC<br>)<br>DELETE   | authorize<br>iorida Sta<br>TE: Registere<br>13.<br>1.1 Ti<br>1.2 N<br>1.3 S<br>1.4 C<br>2.1 Ti<br>2.2 N<br>2.3 S<br>2.4 C<br>3.1 Ti<br>3.2 N<br>3.3 S  | GAGENT BIGHTERE     ADDRESS     TTLE     AME     TREET ADDRESS     TTY-ST-ZIP     TLE     AME     TREET ADDRESS     TTY-ST-ZIP     TLE     AME     TREET ADDRESS     TTY-ST-ZIP   | Poration<br>required<br>VI<br>VI<br>PI<br>MK<br>25<br>CX<br>T                    | n's board of directors. I her<br><u>ADDITIONS/CHANGES</u><br>D<br>SD<br>SD<br>NATRY, CHARLES<br>SALHAMBRA CIF<br>SRAL, GABLES, FI   | TO OFFIC  | DATE<br>DATE<br>CERS AND         | Changing it<br>ointment as<br>DIRECTOF           | IS IN 12   |
| CORAL<br>Pursuant t<br>office or re<br>agent. 1 ar<br>SNATURE<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E  | GABLES FL 33<br>a<br>to the provisions of<br>egistered agent, of<br>m familiar with, an<br>Signature hypad or prin<br>D<br>GETMAN, D<br>265 ALHAM<br>CORAL GAE<br>D<br>KERRIGAN,<br>255 ALHAM<br>CORAL GAE<br>MCNA<br>IRYRIGAN, O<br>255 ALHAM           | 134<br>of Sections 617.0502<br>or both, in the State of<br>d accept the obliga<br>ed name of registered agen<br>OFFICERS AND<br>ENNIS J<br>BRA CIRCLE<br>BRA CIRCLE<br>BRA CIRCLE<br>LES FL 33134<br>CHARLES L<br>BRA CIRCLE  | of Florida. Su<br>ations of, Sect<br>nt and litle if applic               | ch change was<br>ion 617.0503, F<br>able (NC<br>5<br>DELETE<br>DELETE<br>DELETE   | authorize<br>iorida Sta<br>TE: Registere<br>13.<br>1.1 Ti<br>1.2 N<br>1.3 S<br>1.4 C<br>2.1 Ti<br>2.2 N<br>2.4 C<br>3.1 Ti<br>3.2 N<br>3.3 S<br>3.4 C<br>4.1 Ti<br>4.2 M   | B4     City       Dove-named     dby the conjutes.       d Agent eigneture     The conjutes.       TLE     AME       TREET ADDRESS     TY-ST-ZIP  | Prequired<br>VI<br>VI<br>VS<br>PI<br>MK<br>25<br>CC<br>T                         | n's board of directors. I her<br>when reinstating)<br>ADDITIONS/CHANGES<br>D<br>SD<br>SD<br>NAIRY, CHARLES<br>SAJHAMBRA CIE<br>SRAI, GABLES, FI<br>NAIRY, HENRY   | to offic<br>to offic<br>t.<br>CLE<br>3313                 | DATE<br>DATE<br>CERS AND         | changing it<br>ointment as                       | s registered<br>registered<br>IS IN 12<br>Addition             |
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| CORAL<br>Pursuant t<br>office or re<br>agent. 1 ar<br>SNATURE<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E  | GABLES FL 33<br>a<br>to the provisions of<br>egistered agent, of<br>m familiar with, an<br>Signature hypad or prin<br>D<br>GETMAN, D<br>265 ALHAM<br>CORAL GAE<br>D<br>KERRIGAN,<br>255 ALHAM<br>CORAL GAE<br>MCNA<br>IRYRIGAN, O<br>255 ALHAM           | 134<br>of Sections 617.0502<br>or both, in the State of<br>d accept the obliga<br>ed name of registered agen<br>OFFICERS AND<br>ENNIS J<br>BRA CIRCLE<br>BRA CIRCLE<br>BRA CIRCLE<br>LES FL 33134<br>CHARLES L<br>BRA CIRCLE  | of Florida. Su<br>ations of, Sect<br>nt and litle if applic               | ch change was<br>ion 617.0503, F<br>able (NC<br>3<br>DELETE<br>DELETE<br>DELETE<br>DELETE<br>DELETE<br>DELETE           | authorize<br>iorida Sta<br>TE: Registere<br>13.<br>11.11<br>1.2 N<br>1.3 S<br>1.4 C<br>2.1 TI<br>2.2 N<br>2.4 C<br>3.1 TI<br>3.2 N<br>3.3 S<br>3.4 C<br>4.1 TI<br>4.2 N<br>4.3 S<br>4.4 C<br>5.1 TI<br>5.2 N<br>5.3 S<br>5.4 C   | B4 City     Dove-named     d by the con     tutes.      d Agent eignature     TLE     AME     TREET ADDRESS     TTY-ST-ZIP     TLE     AME     TREET ADDRESS     STY-ST-ZIP     TLE     AME     TREET ADDRESS     TTY-ST-ZIP  | Prequired<br>VI<br>VI<br>VI<br>VS<br>PI<br>XS<br>CC<br>T<br>ZA<br>25             | ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CHANGES<br>ADDITIONS/CH | TO OFFIC<br>TO OFFIC<br>CLE<br>3313<br>CLE                | DATE<br>DATE<br>DATE<br>DERS AND | changing it<br>ointment as<br>DIRECTOF<br>Change | s registered<br>registered<br>IS IN 12<br>Addition             |
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| ANNUAL   | PROFIT<br>PRATION<br>REPORT<br>97  |   | IDA DEPAR<br>Sandra B<br>Secretar<br>ISION OF C | . Mortha<br>y of State  | <b>m</b> .   |   |   | ·   |
|--|--|---|---|---|--|---|---|---|
| OCUME<br>Corporation Na  | ENT # <b>N118</b>  | 24  | (2)   |   |  |   |   |   |
| •  | D GOSPEL CHURCH C  | of Deliveranci                                  | e, inc.   |   |  | A AMA IFINI NA 2000 ADAR JAINA IMII A   | nan aktor kokor nanor   | NENCE MINIA DIMINIANA   |
|  |  |   |   |   |  |   |   |   |
| REV. EARLY C.  |  | Mailing Addre                                   | LY C. OLIVE                                     | R   |  |   |   |   |
| ) RAVENALL AVI<br>ANDO FL 32811  |  | 1750 RAVENALL<br>ORLANDO FL 3                   |   |   |  | 3. Date Incorporated or Qualified<br>10/31/1985   | 3a. Date of 05/0  | Last Report   |
| Principal Place  | of Business  | 2a. Mailing Ad                                  | Idress  |   |  | 4. FFI Number   |   | Applied For   |
| Suite, Apt. #, et  | tc   | 26<br>Suite, Apt.                               | #, etc.   |   |  | 59-2735390  | E \$8   | Not Applicable  |
| City & State   |  | 27<br>City & State                              | le  |   |  | 5. Certificate of Status Desired     6. Election Campaign Financing   |   | Fee Required  |
| •  |  | 28  |   | Cour  |  | Trust Fund Contribution   |   | dded to Fees  |
| ζip  | Country<br>25  | Zip<br>29                                       |   | Cour<br>30  | ltr <b>y</b>   |   | Yes 🛃 No  |   |
| 9  | Name and Address of Curr   | rent Registered Agen                            | nt  |   | 81 Name  | 10. Name and Address of New Re  | egistered Agent   | <u> </u>  |
|  |  |   |   |   | 83   |   |   |   |
| 1750 RAVEN<br>ORLANDO F  | FL 32811   | 502 and 617.1508, Fig                           | orida Statute                                   | -   | 64 City  | poration submits this statement for the p   | FL 85   |   |
| ORLANDO F  | EL 32811<br>te provisions of Sections 617.0<br>tered agent, or both, in the Sta<br>amiliar with, and accept the ob   |   | orida Statuti<br>lange was a<br>17.0503, Fic    | -   | 64 City  | poration submits this statement for the pation's board of directors. I hereby acce  | PL I  |   |
| ORLANDO F  | EL 32811<br>te provisions of Sections 617.0<br>tered agent, or both, in the Sta<br>umiliar with, and accept the ob   |   |   | es, the ab<br>authorized<br>orida Statu   | 84 City<br>ove-named cor<br>by the corpora<br>ties.  | poration submits this statement for the p<br>ation's board of directors. I hereby accep<br>uted when reinstating)<br>ADDITIONS/CHANGES TO OFFIC | purpose of chan<br>pt the appointm<br>DATE  | iging its registered<br>ent as registered   |
| ORLANDO F<br>Pursuant to th<br>office or regis<br>agent. I am fa<br>NATURE   | EL 32811<br>te provisions of Sections 617.0<br>tered agent, or both, in the Sta<br>uniliar with, and accept the ob<br>alure, typed or pricted name of registered<br>OFFICERS /   | agent and title if applicable.                  |   | es, the ab<br>authorized<br>orida Statu<br>E: Registered<br>13.   | 84 City<br>ove-named cor<br>by the corpore<br>tes.<br>Agent signature requ   | utred when reinstating)   | DATE  | iging its registered<br>ent as registered   |
| ORLANDO F<br>Pursuant to th<br>office or regis<br>agent. I am fa<br>NATURE<br>Signe  | EL 32811<br>te provisions of Sections 617.0<br>tered agent, or both, in the Sta<br>milliar with, and accept the ob<br>ature, typed or pricted name of registered<br>OFFICERS /<br>OFFICERS /<br>DUVER, EARLY C.  | agent and title if applicable.                  | (NOT  | es, the ab<br>authorized<br>orida Statu<br>E: Registered<br>13.<br>1.1 TIT<br>1.2 NA  | 84 City<br>ove-named cor<br>by the corpore<br>tes.<br>Agent signature requ   | utred when reinstating)   | DATE  | ging its registered<br>ent as registered<br>CTORS IN 12   |
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| ORLANDO F<br>Pursuant to th<br>office or regis<br>agent. I am fa<br>NATURE<br>Signe<br>E<br>E<br>E<br>1 ADDRESS<br>ST-ZIP  | EL 32811<br>te provisions of Sections 617.0<br>tered agent, or both, in the Sta-<br>milliar with, and accept the ob-<br>ature, typed or printed name of registered<br>OFFICERS /<br>OP<br>DLIVER, EARLY C.<br>1750 RAVENALL AVE.<br>DRLANDO FL<br>CDV  | agent and litle if applicable.<br>AND DIRECTORS | (NOT  | es, the ab<br>authorized<br>orida Statu<br>E: Registered<br>13.<br>1.1 TIT<br>1.2 MA<br>1.3 STF<br>1.4 CIT<br>2.1 TIT   | 84 City<br>ove-named cor<br>by the corpora<br>ites.<br>Agent signature requ<br>I.E<br>KE<br>EET ADORESS<br>Y-ST-ZIP<br>LE  | utred when reinstating)   | DATE<br>CERS AND DIRE   | iging its registered<br>ent as registered<br>ECTORS IN 12   |
| ORLANDO F Pursuant to th office or regis agent. I am fa NATURE EI ADDRESS EI  | EL 32811<br>te provisions of Sections 617.0<br>tered agent, or both, in the Sta<br>miliar with, and accept the ob<br>ature, typed or printed name of registered<br>OFFICERS /<br>OP<br>DLIVER, EARLY C.<br>1750 RAVENALL AVE.<br>DRUNDO FL<br>DUV<br>DLIVER, ELAINE<br>1750 RAVENALL AVE.  | agent and litle if applicable.<br>AND DIRECTORS | (NOT  | es, the ab<br>authorized<br>orida Statu<br>E: Registered<br>13.<br>1.1 TIT<br>1.2 NA<br>1.3 STF<br>1.4 CIT<br>2.1 TIT<br>2.2 NA   | 84 City<br>ove-named cor<br>by the corpora<br>ites.<br>Agent signature requ<br>I.E<br>KE<br>EET ADORESS<br>Y-ST-ZIP<br>LE  | utred when reinstating)   | DATE<br>CERS AND DIRE   | inging its registered<br>ent as registered<br>ECTORS IN 12<br>Change Addition   |
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