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NONPROFIT CORPORATION ANNUAL REPORT 1997		Sandra B Secreta	FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		Apr 23 1997 8:00a Secretary of State		
DELAN	MENT # N202 D CHAPTER #4029 OF F ED PERSONS, INC.	` ,	` '				
Principal Place of Business Mailing Address							
429 W PENNA 1 DELAND FL 327 US		429 W PENNA AVE DELAND FL 32720-3336 US			0	Date Hand	
A 03. : 15.			·	3. Date Incorporated or 04/22/1987	Qualified 3a.	Date of Last F 04/16/19	96
2. Principal Pi	ace of Business	2a. Mailing Address 26		4. FEI Number 33-0192400			oplied For of Applica
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Di	esired	\$8.75	Additiona
City & State		City & State		6. Election Campaign Fir	nancing		equired May Be
3	Country	28	Country	Trust Fund Contributio	on 🔲	Added	to Fees
Zip 4	Country 25	Zip	Country 30	This corporation has ti Florida Statutes	iability for intangi Yes		. 199.03
	9. Name and Address of Curr	rent Registered Agent	81 Name	10. Name and Address of	of New Register	ed Agent	
429 W P DELAND	, JACK G. PENNA AVE 1 FL 32720 to the provisions of Sections 617.0 egistered agent, or both, in the Sta	3502 and 617.1508, Florida Statut	83 84 City	Address (P.O. Box Number is Not	nt for the purpos	e of changing i	Code
11. Pursuant toffice or reagent. Ler	PENNA AVE I FL 32720 to the provisions of Sections 617.0 egistered agent, or both, in the Stam familiar with, and accept the ob	ate of Florida. Such change was a digations of, Section 617.0503, Flo	84 City les, the above-named authorized by the corporida Statutes.	corporation submits this statemer oration's board of directors. I her	ht for the purpose eby accept the a	e of changing i appointment as	ts registe
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14. 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 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 consoration or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed by on an attachment with an address.