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	RPORATION	FL	ORIDA DEPAR Sandra B.			Mar 27	1998 8:	:00a
	JAL REPORT		Secretary of State			Secretary of State		
	1998		DIVISION OF C	ORPORA	TIONS			state
Corporation	MENT # N20	)514	(8)					
	IERNAIRE HOMEOWN	IFRS ASSOCIATIO	ON. INC.					
							AND	NAN ONN NO
rincipal Plac	e of Business	Mailing Ac	Idress				II FILL FILL OF III FILL FILL	IN IT BEFORE IN FR
0 N ORANGE AVE P O BOX 1033 SUITE 700 SUITE 700 ORLANDO FL 32801 MOUNT DORA FL 32757						3. Date Incorporated or Qualified		
						05/06/1987 4. FEI Number		Applied For
	·	US				59-2810406		ot Applicable
Principal Place of Business 26. Mailing Address 26						5. Certificate of Status Desired		Additional legulred
Sulte, Apt. #, etc. Suite, Apt. #, etc.						6. Election Campaign Financing	\$5.00	May Be
City & State City & State 28						Trust Fund Contribution 7. Is this nonprofit corporation a		
Zip	Country	28 Zip	<u> </u>	Cour	itry	······································	Yes No	
25		29	9 30			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No		
	9. Name and Address of	Current Registered A	gent	i	B1 Name	10. Name and Address of New I	Registered Agent	
	g, lee, jay				82 Street Ac	dress (P.O. Box Number is Not Accept	able)	
20 N OR SUITE 70	IANGE AVE							
					83			
	O FL 32801				B3 City	· · · · · · · · · · · · · · · · · · ·	les Zin	Code
ORLAND	O FL 32801	617 0502 and 617 1508	Eloride Statuto	1	84 City	repression submits this statement for the	FL   ``   ``	Code
ORLAND	O FL 32801	517.0502 and 617.1508 re State of Florida. Such e obligations of, Sectior	, Floride Statute change was au n 617.0503, Flor	s, the ab	84 City	propration submits this statement for the ration's board of directors. I hereby acc		ts registered
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