ADVOCACY CENTER FOR PERSONS WITH DISABILITIES, I  OI JUL 1.3 — AM - 9: ( SECRETARY OF STATALLAHASSEET FLOR  Melling Address  271 EXECUTIVE CENTER CR. W.  100  INALIAMASSE FL 32301-2024  IS  Suita, Apt. #, etc.  City & State  Cey & State  C
Incipial Place of Business  Metling Address  271 EXECUTIVE CENTER CIR. W.  DIALMASSEE FL. 32301-3224  SPrincipial Place of Business  S. Mailing Address  Suite, Apr. #, etc.  DO NOT WRITE IN THIS SPACE  City & State  DO NOT WRITE IN THIS SPACE  Not Applied  Not Applied  BLUMENTHAL, GARY H  Street Address of Current Registered Agent  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.  City  City  City  City  City  City  City  FL  Zip Code  Tallahassee FL 32301  City  FL  Zip Code  Tallahassee FL 32301  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.  City  FEL NOW:  FLE IS \$61.25  Total Fund Centribution  Added to Fees  Added to Fees  Make Check Payable to Department of State  City State  Added to Fees  Make Check Payable to Department of State  City State  City State  City State  FILE NOW:  FEE IS \$61.25  Total Fund Centribution  Added to Fees  Make Check Payable to Department of State  City State  City  FILE NOW:  FEE IS \$61.25  Total Fund Centribution  Added to Fees  Make Check Payable to Department of State  City State  City State  City State  City State  Added to Fees  Make Check Payable to Department of State  City State  C
THE EXECUTIVE CENTER CIR. W.  DILLAMASSE FL 32301-2024  SPRINCIPAL PLANTASSE FL 32301-2024  US  Principal Place of Business  J. Mailing Address  Suite, Apt. #, etc.  DO NOT WRITE IN THIS SPACE  City & State  Country  Zip  Country  Zip  Country  Zip  Country  Zip  Country  Zip  Country  Street Address of Status Desired  A pplied Fo Not Applied  Name  Street Address of New Registered Agent  Name  Street Address of New Registered Agent  Name  Street Address of Not Acceptable)  City  FL  Zip Code  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.  CINATURE  Sepatara, spend or projectness of meacord agent entitle of application.  FEL NOW:  FLE IS \$61.25  Trust Fund Contribution.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  SMITH, MARION  1846 OAKDALE LANE N  CHANGES  CHANGE  STEELE, DIANE  ST
THE EXECUTIVE CENTER CIR. W.  DILLAMASSE FL 32301-2024  SPRINCIPAL PLANTASSE FL 32301-2024  US  Principal Place of Business  J. Mailing Address  Suite, Apt. #, etc.  DO NOT WRITE IN THIS SPACE  City & State  Country  Zip  Country  Zip  Country  Zip  Country  Zip  Country  Zip  Country  Street Address of Status Desired  A pplied Fo Not Applied  Name  Street Address of New Registered Agent  Name  Street Address of New Registered Agent  Name  Street Address of Not Acceptable)  City  FL  Zip Code  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.  CINATURE  Sepatara, spend or projectness of meacord agent entitle of application.  FEL NOW:  FLE IS \$61.25  Trust Fund Contribution.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  SMITH, MARION  1846 OAKDALE LANE N  CHANGES  CHANGE  STEELE, DIANE  ST
DILLHARSSE FL 32301-2024  INAMESSE FL 32301-2024  INAM
Suite, Apt. #, etc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  Ci
Suite, Apt. #, etc.  City & State  City & State  Country  Sp. 2824728  A, FEI Number  Sp. 2824728  A FEI Number  Street Address of New Registered Agent  Name  Street Address (P.O. Box Number is Not Acceptable)  City  FL Zip Code  City  FL Zip Code  City  FL Zip Code  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.  Sprakura, Apper or presentative of registered Agent expectation encared when remasting)  DATE  FILE NOW:  FEE IS \$61 25  Trust Fund Contribution  Address (P.O. Box Number is Not Acceptable)  DATE  FILE NOW:  FEE IS \$61 25  Trust Fund Contribution  Address of New Registered Agent  A FEI Number  Sprakura, Apper or presentation of the purpose of changing its registered office or registered agent, or both, in the state of Florida.  BATE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10:  BATE  Sprakura, Apper or presentation of the purpose of changing its registered office or registered agent, or both, in the state of Florida.  BATE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10:  BATE  Sprakura, Apper or presentation of the purpose of changing its registered office or registered agent, or both, in the state of Florida.  BLUMENTHAL INTERPRETATION of the purpose of changing its registered office or registered agent, or both, in the state of Florida.  BLUMENTHAL INTERPRETATION of the p
City & State  Country  Country  Country  Country  Country  S. Certificate of Status Desired  \$8.75 Additional Fee Required  8. Name and Address of Current Registered Agent  Name  Street Address (P.O. Box Number is Not Acceptable)  Street Address (P.O. Box Number is Not Acceptable)  City  FL  Zip Code  City  FL  Zip Code  City  FL  Zip Code  City  FL  Zip Code  TatlaHassee Fl 32301  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.  GNATURE  Signature, popular protect raine of registered agent and that if applicable.  Position Campaign Financing FEE IS 861/25  Trust Fund Contribution  Added to Fees  Make Check Payable to Department of State  PD  Added to Fees  Make Check Payable to Department of State  NAME SIRET ADDRESS  SIRET ADDRESS  CITY-S1-ZIP  CLEARWATER IFL 33764  EET ADDRESS  STREEL DIANE STREEL DIANE STREEL DIANE STREEL DIANE STREEL DIANE STREEL ADDRESS  STREEL DIANE STREET ADDRESS  STREET ADDR
City & State  Country
Sp-2824728   Not Applica   Zip
ELUMENTHAL, GARY H 2671 EXECUTIVE CENTER CIR W.  Streel Address (P.O. Box Number is Not Acceptable)  City FL Zip Code  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.  GNATURE  Signalure, typed or printed name of registered agent and tion if applicable.  FILE NOW: FEE IS \$61:25  FILE NOW: FEE IS \$61:25  OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10.  LE W. SMITH, MARION 1784 OAKDALE LANE N CIEV STREET ADDRESS 1986 OAKDALE LANE N CIEV STREET ADDRESS 1987 OCACHLIGHT CIRCLE  RECTADORESS 1987 OCACHLIGHT CIRCLE
8. Name and Address of Current Registered Agent  Name  Street Address (P.O. Box Number is Not Acceptable)  Street Address (P.O. Box Number is Not Acceptable)  City  FL  Zip Code  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.  GNATURE  Signature, typed or protect name of registered agent and title if applicable.  FILE NOW:  FEE IS \$61 25  Trust Fund Contribution.  OFFICERS AND DIRECTORS  11.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10.  LE  SMITH, MARION  STREET ADDRESS  CITY \$1.2P  CLEARWATER IFL 33764  CLEARWATER IFL 33764  CCHANGE  STREET ADDRESS
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  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.  GNATURE  Signature, hyped or protect name of registered agent and time if applicable. [NOTE] Registered Agent signature required when remastering]  FILE NOW:  FILE NOW:  FEE IS \$61.25  Trust Fund Contribution. Added to Fees  OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10:  BADEITO AND STREET ADDRESS  OFFICERS AND DIRECTORS IN MARION  STREET ADDRESS  CITY ST. ZIP  CLEARWATER FL 33764  EET ADDRESS  OCHANGE TO ADDRESS  OCHANGE Add STREET ADDRESS  OCHANGE Add  CITY ST. ZIP  OCHANGE ADDRESS
STREE IN SOUTH ARRIUN  ET ADDRESS  SMATTH, MARIUN  CITY  FL Zip Code  Code  Code  City  FL Zip Code  Code  City  FL Zip Code  City  FL Zip Code  Code  Code  City  FL Zip Code
City FL Zip Code  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.  SINATURE  Signature, typed or possed name of registered agent and bits if applicable. [NOTE: Registered Agent signature required when remaiting)  FILE NOW:  FIL
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.  SNATURE    Signature, typed or profiled name of negistered agent and bits if applicable.   (NOTE Registered Agent signature required when remistating)   DATE
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.  SNATURE  Signature, typed or provided name of registered agent and title if applicable.  PL  Signature, typed or provided name of registered agent and title if applicable.  (NOTE Registered Agent signature required when rematating)  DATE  FILE NOW:  FEE IS \$61.25  Trust Fund Contribution.  OFFICERS AND DIRECTORS  11.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10:  TITLE  SAMITH, MARION  1884 OAKDALE LANE N  CLEARWATER  FL 33764  ET ADDRESS  STREET ADDRESS  CITY-ST-ZIP  CHANGE  STREET ADDRESS
SNATURE    Signature, typed or provided name of registered agent and tale if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE
FILE NOW: FEE IS \$61 25  FILE NOW: FEE IS \$61 25  FILE NOW: FILE N
FILE NOW: FEE IS \$61.25  FILE NOW: FEE IS \$61.25  FILE NOW: FILE N
FILE NOW: FEE IS \$61 25  OFFICERS AND DIRECTORS  11.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  ESTADORESS 1884 OAKDALE LANE N CLEARWATER FL 33764  EET ADDRESS 1470 COACHLIGHT CIRCLE  PD
FEE IS \$61 25  Trust Fund Contribution. Added to Fees  Department of State  1. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  LE PD SMITH, MARION REET ADDRESS 1884 OAKDALE LANE N CLEARWATER FL 33764  LE VD Delete TITLE ME STEELE, DIANE REET ADDRESS 13470 COACHLIGHT CIRCLE  Trust Fund Contribution. Added to Fees  Department of State  Trust Fund Contribution. Added to Fees  Department of State  Added to Fees  Department of State  Added to Fees  Department of State  Change Add  Added to Fees  Department of State
OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  LE PD SAITH, MARION  SAITH, MARION  1884 OAKDALE LANE N  CLEARWATER FL 33764  LE VD Delete TITLE  ME STEELE, DIANE  13470 COACHLIGHT CIRCLE  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  Change MANA  STREET ADDRESS  1 MANA  STREET ADDRESS  1 STREET ADDRESS  1 STREET ADDRESS  1 STREET ADDRESS  STREET ADDRESS  1 STREET ADDRESS
LE PD SAITH, MARION  SMITH, MARION  1884 OAKDALE LANE N  CLEARWATER  FL 33764  EET ADDRESS  AE STEELE, DIANE  1874 OCOACHLIGHT CIRCLE  STREET ADDRESS  1875
SMITH, MARION  1884 OAKDALE LANE N  CLEARWATER   FL 33764  E
CIEARWATER FL 33764  E VD  CITY-ST-ZIP  COOPUSATY   FC 33020  CITY-ST-ZIP  COOPUSATY
E VD Delete TITLE PS  AE STEELE, DIANE  EET ADDRESS 13470 COACHLIGHT CIRCLE  Delete TITLE  NAME  STREET ADDRESS
STEELE, DIANE 13470 COACHLIGHT CIRCLE STREET ADDRESS
19470 COACHERSTI CINOLE
STAP SEMNOLE FL
E ED Deteta TITLE Change Add
BLUMENTHAL GARY H NAME 4000449:3404
ET ADDRESS 2871 EXEC. CNTR. CIR. W. STE. 100 STREET ADDRESS -07/26/0101007
ALIATASSEE FL 3/301 ******
20000
I TIGGINDU I TAM. AL JR
TADORESS 120 SOUTH WIGGINS ROAD STREET ADORESS
ET ADDRESS -ST-ZIP PLANT CITY FL 33566 STREET ADDRESS CITY-ST-ZIP
120 SOUTH WIGGINS ROAD STREET ADDRESS CITY-ST-ZIP PLANT CITY FL 33566
TITLE NAME  STREET ADDRESS  CITY-ST-ZIP  SD  REED, CARL  REED, CARL  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  Change  Addit  A CALD WE STREET ADDRESS  TITLE  NAME  STREET ADDRESS  TITLE  TITL
The standard of the standard o
120 SOUTH WIGGINS ROAD   120 SOUTH WIGGINS R
LET ADDRESS 120 SOUTH WIGGINS ROAD PLANT CITY FL 33566  E SD REED, CARL LET ADDRESS 2157 MISSION HILLS ROAD LAKELAND FL 33810  STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP O'ANGLETY, FL 32703

SIGNATURE:

850. 408.9071 Date Daybirns Phone 8