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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

) wings	Mailing Address			-
Principal Place of 8 5946 MATANZAS SEBRING FL 338 US	DR	5946 MATANZAS [SEBRING FL 3387; US			
2. Principal Place	of Business	2a. Mailing Address			
Suite, Apt. #, e	tc.	Suite, Apt. #, etc			
City & State		City & State			
23	Country 25	Zip 29	30	Country	
24	9. Name and Address of C				

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US	372	SEBRING FL 33872 US			3. Date Incorporated or Qualified 12/18/1987	3 a. Da	ate of Last Re 03/13/199	95
		2a. Mailing Address			4. FEI Number			plied For
Principal Place of Business Suite, Apt. #, etc. City & State		26		59-2879574: Not Applic 5. Certificate of Status Desired See Required Fee Required			t Applicable	
		Suite, Apt. #, etc.						
		City & State			6. Election Campaign Financing		\$5.00 May Be	
					Trust Fund Contribution Added to Fees			
		Zip	Cou	ıntry	8. This corporation has liability for	intangible I	tax under s. 1	99.032,
Zφ	Country	29	30		Etorida Statutes	∐ Yes L	_l No	
	9. Name and Address of Curren				10. Name and Address of New I	Registered	Agent	
	9. Name and Addices 1.			81 Name				
	OF INTERIOR			82 Street Addi	ess (P.O. Box Number is Not Accepta	ble)		•
JONES, JO	UHNNIE ANZAS DR							
SEBRING	El 33872			83				
SEDMING	FL 33072			84 City		F	85 Zp	Code
				\ L	ration submits this statement for the pard of directors. I hereby accept the ap		honging its re	aistered office
tamiliar with,	, and accept the obligations of, bee			ed Appett Signatur, re pur	ration submits this statement for the pard of directors. Thereby accept the ap	DATE		
ignature _{-si}	ignature, type for printed name of registered age:	claric title Tappli dale	(NOTE Registers		ADDITIONS/CHANGES TO OF	FICERS A	ND DIRECTOR	RS IN 12
2.	OFFICERS AN	NO DIRECTORS					□ Change	☐ Addition
			1 1 1					
'TLE	TD	Претис		TITLE NAME				
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IAME	THOMPSON, SANDRA 5950 MATANZAS DR.		12 13	NAME STREET ADDRESS				
AME TREET ADDRESS	THOMPSON, SANDRA		12 13	NAME			☐ Change	Addition
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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 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 certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under certific the corporation or true the corporation

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