KIC SKILDLUCK CO.	IG FEE IS \$61.2	NT OF STATE		,
NONPROFIT ORPORATION	Sandra B. Mor	ortham		
NUAL REPORT	Secretary of S	State *	1	
1006	DIVISION OF CORP		4	
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CUMENT # N 3063 pration Name of Retired Res	SONS INC		80000182	ູເລຂີຮິຮ
OT RETIFER PER	· • · · · · · ·			51033
I Place of Business	Mailing Address	kard.	***61.25	
I Place of Business %	595 Sabal F	4 20.21		
	Mailing Address  Becalify Hill  575 Sabal F  he Belle, Pl.	, 23708	3. Date incorporated or Qualified	3a. Date of Last Report
	y 🖘	·	09/10/1989	05/01/1995 Applied For
cipal Place of Business	2a. Mailing Address		4. FEI Number 65-0165991	Not Applicable
	Suite, Apt. Wetc		Certificate of Status Desired	\$8.75 Additional Fee Required
e, Apt #, etc 5 4 6	27 0			\$5.00 May Be
8 State	City & State		Election Campaign Financing     Trust Fund Contribution	Added to Fees
	Zip	Country	B. This corporation has liability for	or intangible tax under s. 199.032,
Country 25	29 30	0	Florida Statutes  10. Name and Address of New R	
	nt Registered Agent	81 Name	Possile Will:	ard
9. Name and Address of Currer  SAM NEW TON  120 N. Rivero  La Belle, Fl	jew 5+	82 Street Add	tress (P.O. Box Number is Not Accept	table)
120 N. Kiver	33935	63	15 DADAL FAIM	
M Delie	-	Lai	OD P	EI 85 Zo Code
		84 City	rooration exhanite this statement for the	FL 33933
tursuant to the provisions of Sections 617.05 ffice or registered agent, or both, in the Stati	i02 and 617.1508, Florida Statutes te of Florida, Such channe was all	s, the above-named co uthorized by the corpora	ration's board of directors. I hereby acc	cept the appointment as registered
flice or registered agent, or both, in the Stati gent. I am familiar with, and accept the oblig	gations of, Section 617.0303.1101	1-0 4:11	livel fres	May 7, 1476
ATURE Specifical property of registered as	agent and little if applicable (NOTE	Registered Agent signature req		
Classific broad of Dinied name of register condi-			ADDITIONS/CHANGES TO OF	FFICERS AND DIRECTORS IN 12
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President.	ND DIRECTORS  STOREGETE  ALLOW	13. 11 TITLE 1.2 NAME	Sam New to Nieu	FFICERS AND DIRECTORS IN 12  Change Madditi
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. FJLE	NOW: FILING	G FEE IS \$61.2	<u> 5                                    </u>	7	2
NONPROFI CORPORATIO ANNUAL REPO	T ON	FLORIDA DEPARTMEN Sandra B. Mor Secretary of S DIVISION OF CORP	NT OF STATE tham State		
DOCUMENT	# N30637	(5)			
1. Corporation Name  LABELLE CHAP  RETIRED PERS	TER #4351 OF AMER SONS, INC.	rican association o	F		
Principal Place of Business	Davis H	- Maling Margaret			
C/O SAM NEWTON 120 NORTH RIVERVIEW S LA BELLE FB-33935 US	rosalie H	120 NORTH RIVERVIEW STRE LA BRILLY FL 33935	T 25	3. Date incorporated or Qualified 02/10/1989	3a. Date of Last Report 05/01/1995
2. Principal Place of Susin	ness C	2a. Mailing Address 39,5	Subalta	4. FEI Number 65-0165991	Applied For Not Applicable
505 ce Suite, Ast. #, etc.	bal talmet	Suité, Apt. #, etc	<u>/</u>	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State	FI.	Election Campaign Financing	\$5.00 May Be Added to Fees
23 Laiselle	Country	28 La Re/10	Country	Trust Fund Contribution  8. This corporation has liability for	
4 33935	25 Lendy	29 339 3 5 30 Registered Agent	Hendy	Florida Statutes  10. Name and Address of New	
	/ Additional of the second		81 Name	Preale Hillian	able
NEWTON, SAM 120 NORTH BIVE			82 Street Add	595 Sabal Pal	luct
LA BELLEFT 38	335		84 City	a 19elle	85 Zw Code
<u> </u>			1 - 1 - 4		FL 3393
			he ahove-named corp	poration submits this statement for the p	Surpose of Charliging its registered of the
11. Pursuant to the pro- or registered agent, familiar with, and ag	visions of Sections 617.0502 or both, in the State of Florid coot the obligations of, Section	and 617.1508, Florida Statutes, to a. Such change was authorized b on 617.0503, Florida Statutes.	he above-named corp by the corporation's bo	poration submits this statement for the placed of directors. I hereby accept the accept	oppointment as registered agent. I am
SIGNATURE :	malie 5	Heling)	he above-named corp by the corporation's bo wayistered Agent sgnature req.	Hilliard	April 30 1440
SIGNATURE Signature, by	2	Architecture (NOTE A	logistered Agent signature requ	ured when reinstaling.  ADDITIONS/CHANGES TO O	FFICERS AND DIRECTORS IN 12
SIGNATURE Signature, by	ped or proted name of registered agent of OFFICERS AND	Melecul (NOTE A	logistered Agent signature required.  13. 1.1 TITLE	ADDITIONS/CHANGES TO O	FFICERS AND DIRECTORS IN 12  Change Addition
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SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TO BOOK  BOOK  ADDRESS  CITY-ST-ZIP  LABE  TO BOOK  ADDRESS  CITY-ST-ZIP  LABE	POR TOPICE SAME  OFFICERS AND	DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME	ADDITIONS/CHANGES TO O  Sum New ton  120 M Rivervio  120 M Riv	FRICERS AND DIRECTORS IN 12 Change Addition  Change Addition  Change Addition  Change Addition
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SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-SI-2IP  TITLE  NAME  STREET ADDRESS  CITY-SI-ZIP  TITLE  NAME  NAME  NAME  NAME  NAME  NAME	PON POPULAR ASSESSED OF PO	DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 1.1 TITLE	ADDITIONS/CHANGES TO O  Sum Newston  120 M Rivervio  120 M Riv	FFICERS AND DIRECTORS IN 12  Change Addition  Change Addition  Change Addition  Change Addition
SIGNATURE  SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-SI-2IP  TITLE  NAME  STREET ADDRESS  CITY-SI-ZIP  TITLE  NAME  STREET ADDRESS  LABE  TITLE  NAME  STREET ADDRESS	PON POPULAR ASSESSMENT OF POPULAR ASSESSMENT	DELETE	13. 11 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 1.1 TITLE 2.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 1.1 TITLE 2.2 NAME	ADDITIONS/CHANGES TO O  Sum New ton  120 M Rivervio  120 M Riv	FFICERS AND DIRECTORS IN 12  Change Addition  Change Addition  Change Addition  Change Addition  Change Addition  Change Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-SI-2IP  TITLE  NAME  STREET ADDRESS  CITY-SI-ZIP  LABE  LA	PON POPULAR ASSESSED OF PO	DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 1.1 TITLE 1.2 NAME 4.3 STREET ADDRESS 3.4 CITY-ST-ZIP 1.1 TITLE 1.2 NAME 4.3 STREET ADDRESS	ADDITIONS/CHANGES TO O  Sum New ton  120 M Rivervio  120 M Riv	FFICERS AND DIRECTORS IN 12  Change Addition  Change Addition  Change Addition  Change Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-2IP  TITLE  NEW  STREET ADDRESS  LABBI  TITLE  NEW  STREET ADDRESS  LABBI  LABBI  TITLE  D  TITLE  TITLE  D  TITLE  D  TITLE  TITLE  D  TITLE  TITLE  TITLE  D  TITLE  TITL	PON POPULATION OFFICERS AND OFFICERS OF	DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 1.1 TITLE 1.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	ADDITIONS/CHANGES TO O  Sum New ton  120 M Rivervio  120 M Riv	FFICERS AND DIRECTORS IN 12  Change Addition  Change Addition  Change Addition  Change Addition  Change Addition  Change Addition
SIGNATURE  SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  NEW  NAME  NAME	POR OFFICERS AND OFFICERS OFFICER	DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 1.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 4.4 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 4.4 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 4.4 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.1 STREET ADDRESS 5.2 STREET ADDRESS 5.3 STREET ADDRESS 5.3 STREET ADDRESS 5.4 STREET ADDRESS 5.5	ADDITIONS/CHANGES TO O  Sum New ton  120 M Rivervio  120 M Riv	FFICERS AND DIRECTORS IN 12  Change Addition  Change Addition  Change Addition  Change Addition  Change Addition  Change Addition
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SIGNATURE SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	POT OF PINTED AND OFFICERS AND OFFICERS AND OFFICERS AND NORTH RIVERVIEW STREETLE FL 33935  ARD, ROSALIE	DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 1.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 5.4 NAME 5.5 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 5.7 NAME 5.8 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 5.7 NAME 5.8 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 5.7 NAME 5.8 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 5.7 NAME 5.8 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 5.7 NAME 5.8 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 5.7 NAME 5.8 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 5.7 NAME 5.8 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 5.7 NAME 5.8 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE	ADDITIONS/CHANGES TO O  Sum New ton  120 M Rivervio  120 M Riv	FRICERS AND DIRECTORS IN 12  Change Addition  Change Addition  Change Addition  Change Addition  Change Addition  Change Addition  Available Addition
SIGNATURE  SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-S1-2IP  TITLE  NAME  STREET ADDRESS  CITY-S1-ZIP  TITLE  NAME  STREET ADDRESS  LAB  TITLE  NAME  STREET ADDRESS	PON SAM NORTH-RIVERVIEW STREETLE FL 33935  ARD, ROSALIE BOX 729, "N/A" ELLE FL 33935  LE, JANE BOX 729, "N/A" ELLE FL 33935  LE, JANE BOX 729, "N/A" ELLE FL 33935  FON DOROTHY S NORTH BIMERYIEW STREETLE FL 33935  KER RUTH 9 SIEVER RD LEELE FL 9 HULL ST. SELLE FL	DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 1.1 TITLE 2.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 1.1 TITLE 5.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	Hilliard  ADDITIONS/CHANGES TO O  Som New ton  120 M Rivervio  Latelle FI  President  Rosalic Hilliare  595 Sabal Pain  Frens.  Gladys Lanch  La Belle FI  Sea.  Critze  Sea.  La Belle FI  Sea.  La Belle FI  Sea.  La Belle FI	FRICERS AND DIRECTORS IN 12  Change Addition  Change Addition  Change Addition  Change Addition  Change Addition  Available Addition  Available Addition  Available Addition  Change Addition  Available Addition

SIGNATURE: