| AOUNT DUE C   | OTICE: CORPORATION<br>ON OR BEFORE 9/17/97: \$4  | N WILL BE DISSOLV<br>61.25 (IF DISSOLVED, N                              | ED ON OR AFTER &  | SEPTEM<br>E TO REIN   | BER 17, 199<br>Istate: \$236.   | 17<br>25).                 | F   | ILEI                | )  |   |
|---|--|--|---|---|---|----------------------------|---|---------------------|--|---|
|   | NPROFIT<br>RPORATION   |  | FLORIDA DEPAI   |   |   |                            | Sep 10 1  | 997                 | 8:(  | 00ar  |
|   | JAL REPORT   |  | Sandra I<br>Secreta   | B. Morth<br>ary of Sing   |   |                            | Secreta   |                     |  |   |
| 1997  |  | A ALASIA   | DIVISION OF CORPORATIONS  |   |   |                            | SUICE   | ary O               | C I  | naic  |
| Corporatic  | MENT#N   | 32843  | (7)   |   |   |                            |   |                     |  |   |
| COMM  | UNITY OPPORTUN   | NITIES, INC.   |   |   |   |                            |   |                     |  |   |
|   |  |  |   |   |   |                            |   |                     |  |   |
| ·   | e of Business  |  | ling Address  |   |   |                            | 4 49011191 800 1(140 91001 10111 81600<br>4   |                     | HI WIW11 WI  | L (F Q (Q)) (Q))  |
| 8 RIVERSIDE<br>CKSONVILLE   |  | riverside ave.<br>(Sonville fl 32202                                     | 202   |   |   | DO NOT WRITE IN THIS SPACE |   |                     |  |   |
| i   |  | US   |   |   |   |                            | 3. Date Incorporated or Qualified<br>06/15/1989   | 3a. Date o          |  |   |
| Principal P   | Place of Business  |  | Mailing Address   |   |   |                            | 4, FEI Number<br>31-1274995   | 1                   | Ap   | plied For   |
| Suite, Apt.   | . #, elc.  |  | 26 Suite, Apt. #, etc.  |   |   |                            | 5. Certificate of Status Desired  | \$                  | 8.75   | ot Applicable<br>Additional   |
| City & Stat   | 6  | 27   | 27<br>City & State  |   |   |                            | 6. Election Campaign Financing     5.00 May Be  |                     |  | · • · · · · · · · · · · · · · · · · · ·   |
| ]<br>Zip  | Countr   | 28   | Zip   |   | intry   |                            | Trust Fund Contribution  6. This corporation owes or has pa                               |                     | Added  | lo Fees   |
| <u> </u>  | 25   | 29   | •   | 30  |   |                            | Personal Property Tax due June  | 30. 🗆 Y             | es 👂   | No No   |
| <u> </u>  | 9. Name and Addre  | ess of Current Regist  | ered Agent  | ·····   | 81 Name   |                            | 10. Name and Address of New Re  | gistered Age        | กเ   |   |
|   | RNEST M  |  |   |   | 82 Street   | Addres                     | s (P.O. Box Number is Not Acceptat  | bie)                |  |   |
|   | Erside ave.<br>Nville FL 3 <b>2</b> 202  |  |   |   | 83  |                            |   | · · · · · ·         |  |   |
|   |  |  |   |   | B4 Čity   |                            |   |                     | 5 Zip (  | Code  |
| 1. Pursuant   | to the provisions of Sec   | lions 617.0502 and 61  | 7.1508. Florida Statu   | 100 tha 6   | hove-named  |                            |   | <u> </u>            |  |   |
| office or a   | roaleterad eacht or both   |  | the bear in the state   | ies, ine a  | bove-named  | corpor                     | ation submits this statement for the p  | purpose or chi      | ສມຕິແກດ ແ  | s registered  |
| agent. I a  | am familiar with, and acc  | ept the obligations of,  | a. Such change was<br>Section 617.0503, Fl                            | authorize<br>orida Sta  | d by the corr<br>lutes.   | corpor<br>xoratio          | ation submits this statement for the p<br>n's board of directors. I hereby acce           | pt the appoint      | ment as  | s registered<br>registered  |
| agent. 1 a<br>IGNATURE  | Signature, typed or printed name   | e of registered agent and title I  | applicable. (NO   | OFICIA STA  | d by the corp<br>tutes.   |                            | when reinstating)   | DATE                |  |   |
| agent. I a<br>IGNATURE<br>2.  | Signature, typed or printed name   | ept the obligations of,  | applicable. (NO   | orida Sta   | lUIOS.<br>d Agent signature   |                            |   | DATE<br>DERS AND DI |  |   |
| agent. I a<br>IGNATURE<br>2.<br>Tu:   | am familiar with, and acc<br>Signature, typed or printed name<br>O   | e of registered agent and title II<br>FFICERS AND DIREC                  | applicable. (NOT  | TE: Registere   | d Agent signature   | required<br>D<br>Fe]       | when reinstating)<br>ADDITIONS/CHANGES TO OFFIC   |                     | RECTOR   | IS IN 12  |
| agent. 1 a<br>IGNATURE<br>2.<br>2.<br>TLE<br>AME<br>IREET ADDRESS   | Bigneture, typed or printed name<br>O<br>D<br>NONEMAKER, LOR<br>2581 JOHNSTON  | e of registered agent and title II<br>FFICERS AND DIREC                  | applicable. (NOT  | TE: Registere<br>13.<br>1.1 T<br>1.2 N<br>1.3 S   | d Agent signature<br>TLE<br>AME<br>TREET ADDRESS  | D<br>Fe<br>15(             | when reinstating)<br>ADDITIONS/CHANGES TO OFFIC<br>Liciy Havrilla<br>D6 Tippecanoe Dr. Ap |                     | RECTOR   | IS IN 12  |
| agent. 1 a<br>IGNATURE<br>2.<br>TUE<br>AME<br>IREET ADDRESS<br>TY-ST-ZIP  | Signeture, typed or printed name<br>O<br>D<br>NONEMAKER, LOP   | e of registered agent and title II<br>FFICERS AND DIREC                  | applicable. (NOT  | TE: Registere<br>13.<br>1.1 T<br>1.2 N<br>1.3 S   | d Agent signature<br>TLE<br>AME<br>TREET ADDRESS<br>ITY-ST-ZIP  | D<br>Fe<br>15(             | when reinstating)<br>ADDITIONS/CHANGES TO OFFIC   | DATE<br>CERS AND DI | RECTOR   | IS IN 12  |
| 80000.18<br>IGNATURE<br>2.<br>TLE<br>WE<br>IREET ADDRESS<br>TY-ST-21P<br>TLE  | am familiar with, and acc<br>Signature, typed or printed name<br>O<br>NONEMAKER, LOF<br>2581 JOHNSTON<br>KENNESAW GA<br>D<br>STELLNER-VERST  | e of registered agent and title II<br>FFICERS AND DIREC<br>RETTA<br>ROAD | applicable. (NO<br>TORS   | OFICIA STA<br>TE: Registere<br>13.<br>1.1 T<br>1.2 N<br>1.3 S<br>1.4 C  | d Agent signature<br>TLE<br>AME<br>TREET ADDRESS<br>TTY-ST-ZIP<br>TLE   | D<br>Fe<br>15(             | when reinstating)<br>ADDITIONS/CHANGES TO OFFIC<br>Liciy Havrilla<br>D6 Tippecanoe Dr. Ap | DATE<br>CERS AND DI | RECTOR<br>Change   | IN 12<br>X Addition   |
| egent. 1 a<br>IGNATURE<br>2.<br>TLE<br>WIE<br>IREET ADDRESS<br>TY-ST-ZIP<br>TLE<br>MIE<br>IREET ADDRESS   | am familiar with, and acc<br>Signature, typed or printed name<br>O<br>NONEMAKER, LOF<br>2581 JOHNSTON<br>KENNESAW GA<br>D<br>STELLNER-VERSTO<br>3540 ROLSTON   | e of registered agent and title II<br>FFICERS AND DIREC<br>RETTA<br>ROAD | applicable. (NO<br>TORS   | TE: Registere<br><b>13.</b><br>1.1 T<br>1.2 N<br>1.3 S<br>1.4 C<br>2.1 T<br>2.2 N<br>2.3 S  | d Agent signature<br>TLE<br>AME<br>TREET ADDRESS<br>ITY - ST - ZIP<br>TLE<br>AME<br>TREET ADDRESS   | D<br>Fe<br>15(             | when reinstating)<br>ADDITIONS/CHANGES TO OFFIC<br>Liciy Havrilla<br>D6 Tippecanoe Dr. Ap | DATE<br>CERS AND DI | RECTOR<br>Change   | IN 12<br>X Addition   |
| egent. 1 a<br>IGNATURE<br>2.<br>ILE<br>WE<br>REET ADDRESS<br>TY-ST-ZIP<br>ILE<br>IREET ADDRESS<br>TY-ST-ZIP   | am familiar with, and acc<br>Signature, typed or printed name<br>O<br>NONEMAKER, LOF<br>2581 JOHNSTON<br>KENNESAW GA<br>D<br>STELLNER-VERST  | e of registered agent and title II<br>FFICERS AND DIREC<br>RETTA<br>ROAD | applicable. (NO<br>TORS   | TE: Registere<br><b>13.</b><br>1.1 T<br>1.2 N<br>1.3 S<br>1.4 C<br>2.1 T<br>2.2 N<br>2.3 S  | d Agent signature<br>TLE<br>AME<br>TREET ADDRESS<br>ITY - ST - ZIP<br>TLE<br>AME<br>TREET ADDRESS<br>ITY - ST - ZIP   | D<br>Fe<br>15(             | when reinstating)<br>ADDITIONS/CHANGES TO OFFIC<br>Liciy Havrilla<br>D6 Tippecanoe Dr. Ap |                     | RECTOR<br>Change   | IN 12<br>Addition   |
| agent. 1 a<br>IGNATURE<br>2.<br>TLE<br>WIE<br>REET ADDRESS<br>TY-ST-ZIP<br>TLE<br>IREET ADDRESS<br>TY-ST-ZIP<br>TLE   | am familiar with, and acc<br>Signeture, typed or printed name<br>O<br>NONEMAKER, LOF<br>2581 JOHNSTON<br>KENNESAW GA<br>D<br>STELLNER-VERST<br>3540 ROLSTON<br>FT. WAYNE IN<br>D<br>FISHER, JON                  | e of registered agent and title II<br>FFICERS AND DIREC<br>RETTA<br>ROAD | appicable. (NO<br>TORS  | Conda Sta<br>TE: Registere<br>13.<br>1.1 T<br>1.2 N<br>1.3 S<br>1.4 C<br>2.1 T<br>2.2 N<br>2.3 S<br>2.4 C   | d Agent signature<br>TLE<br>AME<br>TREET ADDRESS<br>ITY-ST-ZIP<br>TLE<br>AME<br>TREET ADDRESS<br>ITY-ST-ZIP<br>TLE  | D<br>Fe<br>15(             | when reinstating)<br>ADDITIONS/CHANGES TO OFFIC<br>Liciy Havrilla<br>D6 Tippecanoe Dr. Ap |                     | RECTOR<br>Change<br>Change                               | KS IN 12<br>Addition  |
| agent. 1 a           iGNATURE           2.           iLE           ME           REET ADDRESS           IY-ST-ZIP           ILE           WHE           REET ADDRESS           IY-ST-ZIP           ILE           WHE           REET ADDRESS           IY-ST-ZIP           ILE           WHE           REET ADDRESS           REET ADDRESS  | am familiar with, and acc<br>Signeture, typed or printed name<br>O<br>NONEMAKER, LOF<br>2581 JOHNSTON<br>KENNESAW GA<br>D<br>STELLNER-VERST<br>3540 ROLSTON<br>FT. WAYNE IN<br>D<br>FISHER, JON<br>5295 S 1100 E | e of registered agent and title II<br>FFICERS AND DIREC<br>RETTA<br>ROAD | appicable. (NO<br>TORS  | orida Sta<br>TE: Registere<br>13.<br>1.1 T<br>1.2 N<br>1.3 S<br>1.4 C<br>2.1 T<br>2.2 N<br>2.3 S<br>2.4 C<br>3.1 T<br>3.2 N<br>3.3 S  | d Agent eigneture<br>TLE<br>AME<br>TREET ADDRESS<br>ITY-ST-ZIP<br>TLE<br>AME<br>TREET ADDRESS<br>ITY-ST-ZIP<br>TLE<br>AME<br>TLE<br>AME<br>TLE<br>AME   | D<br>Fe<br>15(             | when reinstating)<br>ADDITIONS/CHANGES TO OFFIC<br>Liciy Havrilla<br>D6 Tippecanoe Dr. Ap |                     | RECTOR<br>Change<br>Change                               | KS IN 12<br>K Addition  |
| agent. 1 a           ignature           ile           z.           ile           Me           Reet address           try-st-zip           ile           WHE           Reet address           try-st-zip           ile           WHE           Reet address           try-st-zip           ile           WHE           Reet address           try-st-zip           reet address           try-st-zip   | am familiar with, and acc<br>Signeture, typed or printed name<br>O<br>NONEMAKER, LOF<br>2581 JOHNSTON<br>KENNESAW GA<br>D<br>STELLNER-VERST<br>3540 ROLSTON<br>FT. WAYNE IN<br>D<br>FISHER, JON                  | e of registered agent and title II<br>FFICERS AND DIREC<br>RETTA<br>ROAD |   | orida Sta<br>TE: Registere<br>13.<br>1.1.T<br>1.2.N<br>1.3.S<br>1.4.C<br>2.1.T<br>2.2.N<br>2.3.S<br>2.4.C<br>3.1.T<br>3.2.N<br>3.3.S<br>3.4.L   | d Agent eigneture<br>TLE<br>AME<br>TREET ADDRESS<br>ITY-ST-ZIP<br>TLE<br>AME<br>TREET ADDRESS<br>ITY-ST-ZIP<br>TLE<br>AME<br>IREET ADDRESS<br>ITREET ADDRESS<br>ITREET ADDRESS  | D<br>Fe<br>15(             | when reinstating)<br>ADDITIONS/CHANGES TO OFFIC<br>Liciy Havrilla<br>D6 Tippecanoe Dr. Ap |                     | RECTOR<br>Change<br>Change<br>Change                     | KS IN 12<br>K Addition  |
| egent. 1 a<br>IGNATURE<br>2.<br>ILE<br>ME<br>REET ADDRESS<br>I <u>Y-ST-ZIP</u><br>ILE<br>ILE<br>ILE<br>ILE<br>ILE<br>ILE<br>ILE<br>ILE  | am familiar with, and acc<br>Signeture, typed or printed name<br>O<br>NONEMAKER, LOF<br>2581 JOHNSTON<br>KENNESAW GA<br>D<br>STELLNER-VERST<br>3540 ROLSTON<br>FT. WAYNE IN<br>D<br>FISHER, JON<br>5295 S 1100 E | e of registered agent and title II<br>FFICERS AND DIREC<br>RETTA<br>ROAD | Applicable. (NO<br>TORS   | orida Sta<br>TE: Registere<br>13.<br>1.1 T<br>1.2 N<br>1.3 S<br>1.4 C<br>2.1 T<br>2.2 N<br>2.3 S<br>2.4 C<br>3.1 T<br>3.2 N<br>3.3 S  | I Agent signature<br>TLE<br>AME<br>TREET ADDRESS<br>ITY-ST-ZIP<br>TLE<br>AME<br>ITY-ST-ZIP<br>TLE<br>AME<br>ITREET ADDRESS<br>ITY-ST-ZIP<br>TLE<br>AME<br>ITREET ADDRESS<br>ITY-ST-ZIP<br>TLE   | D<br>Fe<br>15(             | when reinstating)<br>ADDITIONS/CHANGES TO OFFIC<br>Liciy Havrilla<br>D6 Tippecanoe Dr. Ap |                     | RECTOR<br>Change<br>Change                               | IN 12<br>Addition   |
| agent. 1 a           GNATURE           I.           GNATURE           I.           I.           REET ADORESS           Y-ST-ZIP           LE           ME           REET ADDRESS           Y-ST-ZIP           LE           ME           REET ADDRESS           Y-ST-ZIP           LE           ME           REET ADDRESS           IY-ST-ZIP           LE           ME           REET ADDRESS           IY-ST-ZIP           LE           ME           ME           ME           ME  | am familiar with, and acc<br>Signeture, typed or printed name<br>O<br>NONEMAKER, LOF<br>2581 JOHNSTON<br>KENNESAW GA<br>D<br>STELLNER-VERST<br>3540 ROLSTON<br>FT. WAYNE IN<br>D<br>FISHER, JON<br>5295 S 1100 E | e of registered agent and title II<br>FFICERS AND DIREC<br>RETTA<br>ROAD |   | orida Sta<br>TE: Registere<br>13.<br>1.1T<br>1.2N<br>1.3S<br>1.4C<br>2.1T<br>2.2N<br>2.3S<br>2.4C<br>3.1T<br>3.2N<br>3.3S<br>3.4.(<br>4.1T<br>4.21  | I Agent signature<br>TLE<br>AME<br>TREET ADDRESS<br>ITY-ST-ZIP<br>TLE<br>AME<br>ITY-ST-ZIP<br>TLE<br>AME<br>ITREET ADDRESS<br>ITY-ST-ZIP<br>TLE<br>AME<br>ITREET ADDRESS<br>ITY-ST-ZIP<br>TLE   | D<br>Fe<br>15(             | when reinstating)<br>ADDITIONS/CHANGES TO OFFIC<br>Liciy Havrilla<br>D6 Tippecanoe Dr. Ap |                     | RECTOR<br>Change<br>Change<br>Change                     | IS IN 12<br>X Addition<br>Addition  |
| Agent. 1 a<br>GINATURE<br>GINATURE<br>LE<br>ME<br>V-ST-ZIP<br>LE<br>ME<br>REET ADDRESS<br>Y-ST-ZIP<br>LE<br>ME<br>REET ADDRESS<br>ME<br>REET ADDRESS  | am familiar with, and acc<br>Signeture, typed or printed name<br>O<br>NONEMAKER, LOF<br>2581 JOHNSTON<br>KENNESAW GA<br>D<br>STELLNER-VERST<br>3540 ROLSTON<br>FT. WAYNE IN<br>D<br>FISHER, JON<br>5295 S 1100 E | e of registered agent and title II<br>FFICERS AND DIREC<br>RETTA<br>ROAD | Section 617.0503, Fi applicable. (NO TORS DELETE DELETE DELETE DELETE | orida Sia<br>TE: Registere<br><b>13.</b><br>1.1T<br>1.2N<br>1.3S<br>1.4C<br>2.1T<br>2.2N<br>2.3S<br>2.4C<br>3.1T<br>3.2N<br>3.3S<br>3.4.1<br>4.1T<br>4.2T<br>4.3S<br>4.4C   | IDIGS.<br>IDIGS.<br>ILE<br>AME<br>IREET ADDRESS<br>ITY-ST-ZIP<br>ILE<br>AME<br>IREET ADDRESS<br>ITY-ST-ZIP<br>ILE<br>AME<br>IREET ADDRESS<br>ITY-ST-ZIP<br>ILE<br>IREET ADDRESS<br>ITY-ST-ZIP   | D<br>Fe<br>15(             | when reinstating)<br>ADDITIONS/CHANGES TO OFFIC<br>Liciy Havrilla<br>D6 Tippecanoe Dr. Ap | DATE                | RECTOR<br>Change<br>Change<br>Change<br>Change           | IS IN 12<br>Addition  |
| agent. 1 a           GINATURE           LE           ME           Vect Address           Y-st-zip           LE           ME           Vect Address           Y-st-zip           LE           ME           Vect Address           Y-st-zip           LE           ME           REET Address           Y-st-zip           LE  | am familiar with, and acc<br>Signeture, typed or printed name<br>O<br>NONEMAKER, LOF<br>2581 JOHNSTON<br>KENNESAW GA<br>D<br>STELLNER-VERST<br>3540 ROLSTON<br>FT. WAYNE IN<br>D<br>FISHER, JON<br>5295 S 1100 E | e of registered agent and title II<br>FFICERS AND DIREC<br>RETTA<br>ROAD |   | Orida Sta           13.           1.1T           12N           1.3S           1.4C           2.1T           22N           2.3S           2.4C           3.1T           3.2N           3.4.1           4.1T           4.25           4.4C           5.1T   | Id Agent signature<br>TLE<br>AME<br>TREET ADDRESS<br>ITY-ST-ZIP<br>TLE<br>AME<br>TREET ADDRESS<br>ITY-ST-ZIP<br>TLE<br>AME<br>TREET ADDRESS<br>ITY-ST-ZIP<br>TLE<br>ITREET ADDRESS<br>ITY-ST-ZIP<br>TLE<br>ITREET ADDRESS<br>ITY-ST-ZIP<br>TLE  | D<br>Fe<br>15(             | when reinstating)<br>ADDITIONS/CHANGES TO OFFIC<br>Liciy Havrilla<br>D6 Tippecanoe Dr. Ap | DATE                | RECTOR<br>Change<br>Change<br>Change                     | IS IN 12<br>Addition  |
| BORNATURE           GNATURE           LE           ME           REET ADDRESS           IY-ST-ZIP           LE           ME           ME           ME                            | am familiar with, and acc<br>Signeture, typed or printed name<br>O<br>NONEMAKER, LOF<br>2581 JOHNSTON<br>KENNESAW GA<br>D<br>STELLNER-VERST<br>3540 ROLSTON<br>FT. WAYNE IN<br>D<br>FISHER, JON<br>5295 S 1100 E | e of registered agent and title II<br>FFICERS AND DIREC<br>RETTA<br>ROAD | Section 617.0503, Fi applicable. (NO TORS DELETE DELETE DELETE DELETE | Orida Sta           11           1.1 T           1.2 N           1.3 S           1.4 C           2.1 T           2.2 N           2.3 S           2.4 C           3.1 T           3.2 N           3.3 S           3.4 (1)           4.3 S           4.4 C           5.1 T           5.2 N  | Idies.<br>d Agent signature<br>TLE<br>AME<br>TREET ADDRESS<br>ITY-ST-ZIP<br>TLE<br>AME<br>TREET ADDRESS<br>ITY-ST-ZIP<br>TLE<br>AME<br>ITY-ST-ZIP<br>TLE<br>IAME<br>ITREET ADDRESS<br>ITY-ST-ZIP<br>TLE<br>IAME<br>ITREET ADDRESS<br>ITY-ST-ZIP<br>TLE<br>AME   | D<br>Fe<br>15(             | when reinstating)<br>ADDITIONS/CHANGES TO OFFIC<br>Liciy Havrilla<br>D6 Tippecanoe Dr. Ap | DATE                | RECTOR<br>Change<br>Change<br>Change<br>Change           | IS IN 12<br>Additio   |
| AGONATURE<br>GINATURE<br>LE<br>ME<br>REET ADDRESS<br>I <u>Y-ST-ZIP</u><br>LE<br>ME<br>REET ADDRESS<br>I <u>Y-ST-ZIP</u><br>LE<br>ME<br>REET ADDRESS<br>I <u>Y-ST-ZIP</u><br>LE<br>ME<br>REET ADDRESS<br>I <u>Y-ST-ZIP</u><br>LE<br>ME<br>REET ADDRESS   | am familiar with, and acc<br>Signeture, typed or printed name<br>O<br>NONEMAKER, LOF<br>2581 JOHNSTON<br>KENNESAW GA<br>D<br>STELLNER-VERST<br>3540 ROLSTON<br>FT. WAYNE IN<br>D<br>FISHER, JON<br>5295 S 1100 E | e of registered agent and title II<br>FFICERS AND DIREC<br>RETTA<br>ROAD | Section 617.0503, Fi applicable. (NO TORS DELETE DELETE DELETE DELETE | orida Sta<br>TE: Registere<br>13.<br>1.1 T<br>1.2 N<br>1.3 S<br>1.4 C<br>2.1 T<br>2.2 N<br>2.3 S<br>2.4 C<br>3.1 T<br>3.2 N<br>3.3 S<br>3.4. (<br>4.1 T<br>4.2 I<br>4.3 S<br>4.4 C<br>5.1 T<br>5.2 N<br>5.3 S   | d Agent signature<br>TLE<br>AME<br>TREET ADDRESS<br>ITY-ST-ZIP<br>TLE<br>AME<br>TREET ADDRESS<br>ITY-ST-ZIP<br>TLE<br>AME<br>TREET ADDRESS<br>ITY-ST-ZIP<br>TLE<br>IAME<br>TREET ADDRESS<br>ITY-ST-ZIP<br>TLE<br>IAME<br>TREET ADDRESS<br>ITY-ST-ZIP<br>TLE<br>IAME<br>TREET ADDRESS  | D<br>Fe<br>15(             | when reinstating)<br>ADDITIONS/CHANGES TO OFFIC<br>Liciy Havrilla<br>D6 Tippecanoe Dr. Ap | DATE                | RECTOR<br>Change<br>Change<br>Change<br>Change           | IS IN 12<br>Additio   |
| agent. 1 a           IGNATURE           2.           IRET ADDRESS           TY-ST-ZIP           TLE           MME           IREET ADDRESS           TY-ST-ZIP | am familiar with, and acc<br>Signeture, typed or printed name<br>O<br>NONEMAKER, LOF<br>2581 JOHNSTON<br>KENNESAW GA<br>D<br>STELLNER-VERST<br>3540 ROLSTON<br>FT. WAYNE IN<br>D<br>FISHER, JON<br>5295 S 1100 E | e of registered agent and title II<br>FFICERS AND DIREC<br>RETTA<br>ROAD | Section 617.0503, Fi applicable. (NO TORS DELETE DELETE DELETE DELETE | orida Sta<br>TE: Registere<br>13.<br>1.1 T<br>1.2 N<br>1.3 S<br>1.4 C<br>2.1 T<br>2.2 N<br>2.3 S<br>2.4 C<br>3.1 T<br>3.2 N<br>3.3 S<br>3.4. (<br>4.1 T<br>4.2 I<br>4.3 S<br>4.4 C<br>5.1 T<br>5.2 N<br>5.3 S   | d Agent signature<br>TLE<br>AME<br>TREET ADDRESS<br>ITY-ST-ZIP<br>TLE<br>AME<br>TREET ADDRESS<br>ITY-ST-ZIP<br>TLE<br>AME<br>TREET ADDRESS<br>ITY-ST-ZIP<br>TLE<br>IAME<br>TREET ADDRESS<br>ITY-ST-ZIP<br>TLE<br>IAME<br>TREET ADDRESS<br>ITY-ST-ZIP  | D<br>Fe<br>15(             | when reinstating)<br>ADDITIONS/CHANGES TO OFFIC<br>Liciy Havrilla<br>D6 Tippecanoe Dr. Ap |                     | RECTOR<br>Change<br>Change<br>Change<br>Change           | IS IN 12<br>Addition<br>Addition<br>Addition<br>Addition<br>Addition  |
| AME<br>ITY-ST-ZIP<br>ITLE<br>AME<br>TREET ADDRESS<br>ITY-ST-ZIP<br>ITLE<br>AME<br>TREET ADDRESS<br>ITY-ST-ZIP<br>ITLE<br>AME<br>TREET ADDRESS<br>ITY-ST-ZIP<br>ITLE<br>AME<br>TREET ADDRESS<br>ITY-ST-ZIP<br>ITLE<br>AME<br>TREET ADDRESS<br>ITY-ST-ZIP<br>ITLE<br>AME<br>TREET ADDRESS<br>ITY-ST-ZIP<br>ITLE<br>AME  | am familiar with, and acc<br>Signeture, typed or printed name<br>O<br>NONEMAKER, LOF<br>2581 JOHNSTON<br>KENNESAW GA<br>D<br>STELLNER-VERST<br>3540 ROLSTON<br>FT. WAYNE IN<br>D<br>FISHER, JON<br>5295 S 1100 E | e of registered agent and title II<br>FFICERS AND DIREC<br>RETTA<br>ROAD |   | Orida Sta           11           1.1 T           1.2 N           1.3 S           1.4 C           2.1 T           2.2 N           2.3 S           2.4 C           3.1 T           3.2 N           3.3 S           3.4 (1)           4.3 S           4.4 C           5.1 T           5.2 N           5.3 S           5.4 C                | d Agent signature<br>TLE<br>AME<br>TREET ADDRESS<br>ITY-ST-ZIP<br>TLE<br>AME<br>TREET ADDRESS<br>ITY-ST-ZIP<br>TLE<br>AME<br>TREET ADDRESS<br>ITY-ST-ZIP<br>TLE<br>ITREET ADDRESS<br>ITY-ST-ZIP<br>TLE<br>AME<br>TREET ADDRESS<br>ITY-ST-ZIP<br>TLE<br>ITREET ADDRESS<br>ITY-ST-ZIP<br>TLE<br>ITREET ADDRESS<br>ITY-ST-ZIP<br>TLE<br>ITREET ADDRESS | D<br>Fe<br>15(             | when reinstating)<br>ADDITIONS/CHANGES TO OFFIC<br>Liciy Havrilla<br>D6 Tippecanoe Dr. Ap |                     | RECTOR<br>Change<br>Change<br>Change<br>Change<br>Change | IN 12       IN 14       IN 15       IN 16       IN 16 <t< td=""></t<> |
| ADENT. 1 8<br>IGNATURE<br>2.<br>IREET ADDRESS<br>ITY - ST - ZIP<br>TLE<br>AME<br>IREET ADDRESS<br>ITY - ST - ZIP<br>TLE<br>IREET ADDRESS<br>ITY - ST - ZIP<br>TLE<br>IREET ADDRESS<br>ITY - ST - ZIP<br>TLE  | am familiar with, and acc<br>Signeture, typed or printed name<br>O<br>NONEMAKER, LOF<br>2581 JOHNSTON<br>KENNESAW GA<br>D<br>STELLNER-VERST<br>3540 ROLSTON<br>FT. WAYNE IN<br>D<br>FISHER, JON<br>5295 S 1100 E | e of registered agent and title II<br>FFICERS AND DIREC<br>RETTA<br>ROAD |   | Orida Sta           11           1.1 T           1.2 N           1.3 S           1.4 C           2.1 T           2.2 N           2.3 S           2.4 C           3.1 T           3.2 N           3.3 S           3.4 (1)           4.3 S           4.4 C           5.1 T           5.2 N           5.4 C           6.1 T           62 N | d Agent signature<br>TLE<br>AME<br>TREET ADDRESS<br>ITY-ST-ZIP<br>TLE<br>AME<br>TREET ADDRESS<br>ITY-ST-ZIP<br>TLE<br>AME<br>TREET ADDRESS<br>ITY-ST-ZIP<br>TLE<br>ITREET ADDRESS<br>ITY-ST-ZIP<br>TLE<br>AME<br>TREET ADDRESS<br>ITY-ST-ZIP<br>TLE<br>ITREET ADDRESS<br>ITY-ST-ZIP<br>TLE<br>ITREET ADDRESS<br>ITY-ST-ZIP<br>TLE<br>ITREET ADDRESS | D<br>Fe<br>15(             | when reinstating)<br>ADDITIONS/CHANGES TO OFFIC<br>Liciy Havrilla<br>D6 Tippecanoe Dr. Ap |                     | RECTOR<br>Change<br>Change<br>Change<br>Change<br>Change | IN 12<br>X Addition   |