	AMOUNT DUI NO COR ANNU	SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPI AMOUNT DUE ON OR BEFORE 09/15/99: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO NONPROFIT CORPORATION ANNUAL REPORT 1999		EINSTATE: \$236.25). ENT OF STATE Harris State	FILED Aug 02, 1999 8:00 am Secretary of State 08-02-1999 90006 036 ****61.25	
PINCEQUIPAGE DI BLANKESSE Maring XD.MINE 2112 JLAH PAGA SIZUAH POAD TALAMASSEE PL 32201 JALAMASSEE PL 32201 212 JLANK PAGA SUBAL PLANK 212 JLANK PAGA SUBAL PLANK 212 JLANK PAGA SUBAL PLANK 213 JLANK PAGA SUBAL PLANK 214 JLANKSSEE PL 32201 JALANK PLANK 215 JLANK PAGA SUBAL PLANK 216 JLANK PAGA SUBAL PLANK 217 JLANK PAGA SUBAL PLANK 218 JLANK PAGA SUBAL PLANK 219 JLANK PAGA COUNTY ZD 210 JLANK PAGA SUBAL PLANK 211 JLANK PAGA SUBAL PLANK 212 JLANK PAGA PLANK SUBAL PLANK 213 JLANK PAGA SUBAL PLANK 214 JLANK PAGA SUBAL PLANK 215 JLANK PAGA PLANK SUBAL PLANK 216 JLANK PLANK SUBAL PLANK 217 JLANK PLANK PLANK SUBAL PLANK 218 JLANK PLANK PLANK PLANK SUBAL PLANK PLANK 219 JLANK PLANK PL	1. Corporation	Name W MIDDLE SCHOOL PARE	-	DR		
21 23 06(07/1990 Suite, Apt. #, etc. 3 Suite, Apt. #, etc. 4 FE Humber 59-2912491 InterApplicable City & State City & State City & State 5 Carticate of Status Desired State, Apt. #, etc. Zip Country Zip Country Zip Country State State, Apt. #, etc. State Country State Apt. #, etc. Apt. #, etc. Apt. #, etc. State Apt. #, etc. Apt. #, etc. Apt. #, etc. Apt. #, etc.	3415 ZILLAH ROAD 3415 ZILLAH ROAD					
Suite, Apt. #, etc					3. Date Incorporated or Qualifed 06/07/1990	
Carification of Statuse Desired Image: Statuse Desired	Suite, Apt. #, etc. 22		27		- 59-2912491	Not Applicable
24 25 28 30 Thest Fund Contribution Added to Fees 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent HOGAN, CHARLENE 5439 PINDERTON WAY S439 PINDERTON WAY 81 Address of Sectors 617 0502 and 617 1508. Forded Statutes, the above-named corporation submits this statement for the provisor of changing its registered agent, or both, in the State Offords. Statutes, the above-named corporation submits this statement for the provisor of changing its registered agent, or both, in the State Offords. Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered SIGNATURE Byotav, Byota opinota and of process of Section 617.0503, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Tints PD OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Tints VPD DELETE 111THE Onarge Addition NME COLUMAR, RENEE P. 33 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 NME COLUMAR, RENEE F. 32301 DELETE 111THE Onarge Addition NME COLUMAR, RAREN 33 STRET ADDRES Charge Addition NME COLUMAR, P	23	28		Country		Fee Required
HOGAN, CHARLENE 5439 PINOSETION WAY TALLAHASSEE FL 32311 81 Name 42 Street Address (P.O. Box Number is Not Acceptable) 83 43 City FL 85 Zip Code 43 City FL 85 Zip Code 44 City FL 85 Zip Code 45 City FL 85 Zip Code 46 City FL 85 Zip Code 47 Pursuant to the provisions of Sections 617/0502 and 617.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. 1 am familiar with, and accept the obligations of, section 617.000. Florida Statutes Envert Envert Envert SIGNATURE PD OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TILE PD OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TILE VPD DELETE 1173 SEMINOLE DRIVE 13 street Address Change Addition NWE COLVER, RENEE FL 32311 DELETE 1174 SEMINOLE DRIVE Change Addition NWE COLMAN, PAMELA 23 SIRET	`	25	29 30		Trust Fund Contribution	Added to Fees
Signature, types of primes and of the first and the in species. (profer Registered agent and the in species. (profer Registered agent and the inspecies. TITLE PD OELETE 13 TREET ADDRESS (profer Registered agent and the inspecies. (profer Registered agent age	11. Pursuant t office or re agent. 1 an	to the provisions of Sections 617.0502	of Florida. Such change was autho	84 City he above-named corporation	oration submits this statement for the purpos	FL
TTLE PD D BLETE 11 TTLE Change Addition NMME TOLLIVER, RENEE P 12 NMME 12 NMME STREET ADDRESS 1173 SEMINOLE DRIVE 13 STREET ADDRESS STRET ADDRESS 1173 SEMINOLE DRIVE 13 STREET ADDRESS Change Addition TTLE VPD DELETE 21 NTLE Change Addition STRET ADDRESS 6500 HIDDEN LAKES DRIVE 22 STREET ADDRESS Change Addition STRET ADDRESS 6500 HIDDEN LAKES DRIVE 23 STREET ADDRESS Change Addition STRET ADDRESS 6500 HIDDEN LAKES DRIVE 23 STREET ADDRESS Change Addition TTLE S DELETE 31 TTLE Change Addition TTLE S DELETE 31 TTLE Change Addition STRET ADDRESS 2415 CASTLE TOWER LN 32 MME 33 STREET ADDRESS Change Addition STREET ADDRESS 2415 CASTLE TOWER LN 33 STREET ADDRESS Change Addition STREET ADDRESS 3415 CLE TOWER LN 33 STREET ADDRESS Change Addition STREET ADDRESS 3415 CL	-					S AND DIRECTORS IN 12
CH1VE VPD DELETE 21 TITLE Change Addition NME CRAWFORD, KAREN 22 NAME 23 STREET ADDRESS CH1VE 23 STREET ADDRESS STREET ADDRESS S600 HIDDEN LAKES DRIVE 23 STREET ADDRESS 24 CTTY-ST-2P Change Addition MME COLEMAN, PAMELA 23 NAME 24 CTTY-ST-2P Change Addition MAME COLEMAN, PAMELA 32 NAME 33 STREET ADDRESS Change Addition STREET ADDRESS 2415 CASTLE TOWER LN 33 STREET ADDRESS Change Addition STREET ADDRESS 2415 CASTLE TOWER LN 33 STREET ADDRESS CHV-ST-ZP Change Addition TITLE TD DELETE 41 TITLE Change Addition NAME CRUZ, KAREN 42 NAME 42 NAME Change Addition STREET ADDRESS 3415 ZILLAH ROAD 43 STREET ADDRESS Change Addition GTV-ST-ZP TALLAHASSEE FL 32301 44 CTY-ST-ZP Change Addition NME DELETE 51 TITLE Change Addition NAME STREET ADDRESS	TTTLE NAME	PD Tolliver, renee P 1173 Seminole Drive		1.1 TITLE 1.2 NAME		Change Addition
CITY-ST-ZIP TALLAHASSEE FL 32311 2.4 CITY-ST-ZIP ITTLE S DELETE 3.1 TTLE NAME COLEMAN, PAMELA 32 NAME STREET ADDRESS 2415 CASTLE TOWER LN 3.3 STREET ADDRESS CITY-ST-ZIP TALLAHASSEE FL 32301 34. CITY-ST-ZIP TTTLE TD DELETE 41. TTLE NAME CRUZ, KAREN 4.2 NAME STREET ADDRESS 3415 ZILLAH ROAD 43. STREET ADDRESS GITY-ST-ZIP TALLAHASSEE FL 32301 44. CITY-ST-ZIP TTTLE D DELETE 41. TTLE NAME CRUZ, KAREN 4.2 NAME	TITLE NAME	VPD Crawford, Karen		2.1 TITLE 2.2 NAME		Change Addition
CITY-ST-ZIP TALLAHASSEE FL 32301 34. CITY-ST-ZIP TITLE TD DELETE 4.1 TTLE Change Addition NAME CRUZ, KAREN 4.2 NAME STREET ADDRESS 34.15 ZILLAH ROAD 4.3 STREET ADDRESS STREET ADDRESS 34.15 ZILLAH ROAD 4.3 STREET ADDRESS	CITY-ST-ZIP TITLE NAME	TALLAHASSEE FL 32311 S COLEMAN, PAMELA		3.1 TITLE 3.2 NAME	<u> </u>	Change Addition
CITY-ST-ZIP TALLAHASSEE FL 32301 4.4 CITY-ST-ZIP TITLE D DELETE 5.1 TITLE Change Addition NAME HOGAN, CHARLENE 5.2 NAME 5.3 STREET ADDRESS 5.439 PINDERTON WAY 5.3 STREET ADDRESS CITY-ST-ZIP TALLAHASSEE FL 32311 5.4 CITY-ST-ZIP Change Addition TITLE DELETE 6.1 TITLE Change Addition NAME DELETE 6.1 TITLE Change Addition NAME STREET ADDRESS 6.3 STREET ADDRESS Change Addition STREET ADDRESS 6.3 STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP Change Addition	CITY-ST-ZIP TITLE NAME	TALLAHASSEE FL 32301 TD CRUZ, KAREN		3.4. CITY-ST-ZIP 4.1 TITLE 4. 2 NAME		Change Addition
CITY-ST-ZIP TALLAHASSEE FL 32311 5.4 CITY-ST-ZIP TITLE DELETE 6.1 T/TLE Change NAME 6.2 NAME 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP	CITY-ST-ZIP TITLE NAME	TALLAHASSEE FL 32301 D Hogan, Charlene		4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME		Change Addition
At the state of th	CITY-ST-ZIP TITLE NAME	TALLAHASSEE FL 32311		5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME		Change Addition
14. Thereby certify that the information supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or truete empoyend to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, er on epicitachment with an address, with all other like empowered.	CITY-ST-ZIP	- se a la recentra de	, h this filing does not qualify for the annual report is true and accurate ver or trustee empoyed to exect meant with an address with all off		Section 119.07(3)(i), Florida Statutes. I furthe shall have the same legal effect as if made red by Chapter 617, Florida Statutes; and th	er certify that the information under oath; that I am an nat my name appears in