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STREET ADDRESS CITY-ST-ZIP STREET ADDRESS VENICE FL STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other tike empowered. SIGNATURE: SIGNATURE:	TITLE	DP	Delete	TITLE				Change	Addition	
indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as it made under oath; that I am an officer of director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE:	CITY-ST-ZIP	341 VENICE AVE. W VENICE FL	this filing does not qualify for t	CITY-ST-ZIP	stated in Se	action 119.07(3)), Florida Statutes, I furth	ner certify that the	information	
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