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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

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DOCUMENT #
1. Corporation Name

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Principal Place	of Business	Mailing Address		I INGILIAL DIN DINIR BININ DUND TON	DE SILL BIBLI BIBLI BIDH BIDH BIBLI BIBLI HBDI
721 RIDGEWO HOLLY HILL I US	OOD AVENUE FL 32117	721 RIDGEWOOD AVE HOLLY HILL FL 32117 US	NUE		
				3. Date Incorporated or Qualified 11/19/1991	3a. Date of Last Report 07/13/1995
2. Principal Pla 21	ace of Business	2a. Mailing Address 26		4. FEI Number 59-3095259	Applied For Not Applicable
Suite, Apt. i	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	)	City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Zip 29	Country 30	8. This corporation has liability for	····
-1	9. Name and Address of Curr			10. Name and Address of New R	
		V	81 Name	10. The same and Fiderious VI (10W I)	-B
TOWNER	R, WILLIAM				
721 RID	GEWOOD AVENUE			ddress (P.O. Box Number is Not Acceptab	le)
HOLLY F	HILL FL 32117		83		T-I
			84 City		FL 85 Zip Code
11. Pursuant to	ed agent, or both, in the State of Fig	onda. Such change was authoriz	ed by the corporation's b	poration submits this statement for the pur loard of directors. I hereby accept the appe	noce of changing to registered offic
familiar wit	<ul> <li>h, and accept the obligations of, Se</li> </ul>	icuori b 17.0503, Florida Statutes	).		
tamiliar wit SIGNATURE	h, and accept the obligations of, Se			guired when reinstating	DATE
signature	n, and accept the obligations of, Se Signature, typed or printed name of registered ag-		TE Registered Agent signature req		DATE
SIGNATURE 12.	n, and accept the obligations of, Se Signature, typed or printed name of registered ag-	ent and title if applicable (NC	TE Registered Agent signature req	pured when ministating.  ADDITIONS/CHANGES TO OFF	
SIGNATURE  12.	n, and accept the obligations of, Se Signature, typed or printed name of registered ag-	ent and title if applicable (NC ND DIRECTORS	TE Registered Agent signature req		ICERS AND DIRECTORS IN 12
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SIGNATURE: \_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan. 20, 1996 904-248-3/63