	DNPROFIT RPORATION UAL REPORT 1996	Sandra Secreta DIVISION OF	RTMENT OF STATE B Mortham ary of State CORPORATIONS		
 Corporatio 	MENT # N9300 RPRISE FLORIDA INNOVAT	00,005389 (2 Ion Partnership, In	•	L LAANKART ATA TAKAN TAKA ANNA ANNA ANNA ANNA ANN	A A THI A A HIL A A A A A A A A A A A A A A A A A A A
		Mailing Address SUNBANK CENTER, SU SUITE 1200 ORLANDO FL 32801 US	JITE 1205	3. Date Incorporated or Qualified	3a. Date of Last Report
- ·	flace of Business	2a. Mailing Address		11/30/1993 4. FEI Number	05/01/1995
Suite, Apt.	. #, etc.	26 Suite, Apt. #, etc.		59-3227849 5. Certificate of Status Desired	Not Applicable \$8.75 Additional
City & Stat	te	City & State		6. Election Campaign Financing	\$5.00 May Be
I Zip	Country 25	28 Zip 29	Country 30	Trust Fund Contribution 8. This corporation has liability for in Florida Statutes	Audeu to rees
	9. Name and Address of Curre	ent Registered Agent	81 Name	10. Name and Address of New Re	egistered Agent
BRUNDAGE, WILLIAM G SUNBAND CENTER, SUITE 1205 200 S. ORANGE AVENUE ORLANDO FL 32801			82 Street Ac 83	ddress (P.O. Box Number is Not Acceptabl	e)
UKLAN	DO FL 32801		84 City		85 Zip Code
11. Pursuant	to the provisions of Sections 617.050	02 and 617.1508, Florida Statute	es, the above-named corr	poration submits this statement for the purp	FL by Lip code pose of changing its registered office
or registe familiar w IGNATURE 2.	ared agent, or both, in the State of Flo vith, and accept the obligations of, Sec Signature, typed or printed name of registered age	rida. Such change was authorize ction 617.0503, Florida Statutes	es, the above-named corr ed by the corporation's b 	oard of directors. I hereby accept the appo	bose of changing its registered office intment as registered agent. I am
or registe familiar w SIGNATURE 12. ITLE IAME TREET ADDRESS	ared agent, or both, in the State of Flo vith, and accept the obligations of, Sec Signature, typed or onnext name of registered age OFFICERS AT PS BRUNDAGE, WILLIAM G.	rida. Such change was authorize official statutes nt and the flagsicable (NO ND DIRECTORS	ed by the corporation's b	oard of directors. I hereby accept the appo	bose of changing its registered office intment as registered agent. I am
or registe familiar w IIGNATURE 2. TLE AME TREET ADDRESS ITY - ST - ZIP ITLE AME TREET ADDRESS	PS PS PS PS PS PS PS PS PS PS	rida. Such change was authorize official statutes nt and the flagsicable (NO ND DIRECTORS	ed by the corporation's b TE: Registered Agent signature req 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	oard of directors. I hereby accept the appo	Date Of Changing its registered office intment as registered agent. I am DATE CERS AND DIRECTORS IN 12 Change Addition
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