

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED

SECRETARY OF STAJE

DIVISION OF CORPORATIONS 99 OCT 13 PM 4: 53

DOCUMENT # N9400003172

1. Corporation Name

AMERICA'S FUTURE, INC.

Ryincipal Place of Business 39534 CONFERATE POINT RD SUITE 133 JACKSONVILLE FL 32240

Mailing Address 3983-2 CONFERDERATE POINT RD SUITE 133 JACKSONVILLE FL 32210

27 At 1401  City & State  Country  Country  Zip  Country  Zip  Country  Zip  Country  Country  Added to  S. Certificate of Status Desired  Fee Requ  Fee Requ  Zip  Country  Country  Country  Election Campaign Financing  Trust Fund Contribution  P. Name and Address of Current Registered Agent  Trust Fund Contribution  Added to  S. Heghen Boy Kins  HUBBS, WILLIAM D  STEPLEN Boy Kins  All LENOX AV. SUITE 04  JACKSONVILLE FL 32205  PLANSONVILLE FL 32205  ACTIVATION OF The DIVIDAD AND ACCEPTABLE AND ACCEPTABLE AGENT  The Pursuant to the provisions of Sections 617,0502 and 617,1508, Fioride Statutes, the above-named corporation submits this statement for the purpose of changing its recoffice or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617,0503, Florida Statutes.  SIGNATURE  Signature, by Bo or private flerified registering figent and title if applicable  (NOTE: Registered Agent greature when heinbetting)  DATE  OFFICENS AND DIRECTORS  TILLE  D Change  Country  S. Certificate of Status Desired  S. Certificate of Status Desired  Fee Requ  Fee Requ	ired ay Be
Sulfe, Apt. #, etc.  27	pplicable litional ired ay Be
City & State  28 Or Ange Park FA  28 Or Ange Park FA  29 Or Ange Park FA  29 Or Ange Park FA  20 Country  20 Country  21 DUVAL  29 33073  30 DUVAL  40 Name and Address of New Registered Agent  410 LENOX AV. SUITE 04  4104 LENOX AV. SUITE 04  JACKSONVILLE FL 32205  411. Pursuant to the provisions of Sections 617,0502 and 617,1508. Florida Statutes, the above-named composition submits this statement for the purpose of changing its recoffice or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 617,0503, Florida Statutes.  SIGNATURE  Signature, by list or printed familiar with, and accept the obligations of, Section 617,0503, Florida Statutes.  DELETE 111TILE  10 Change  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  110 Change  111 Country  6. Election Campaign Financing  For Require Country  10. Name and Address of New Registered Agent  Added to  10. Name and Address of New Registered Agent  10. Name and Address of New Registered Agent  10. Name and Address of New Registered Agent  110 Name and Address of New Registered Agent  110 Name and Address of New Registered Agent  111 Name Change Agent  112 Name Change Agent  113 Name Change Agent  114 Name Change Agent  115 Name Change Agent  115 Name Change Agent  116 Name Change Agent  117 Name Change Agent  118 Name Change Agent  119 Name Address of New Registered Agent  120 Name Address of New Registered Agent  131 Name Change  140 Name Address of New Registered Agent  15 Name Change Agent  16 Name Address of New Registered Agent  18 Name Change Agent  19 Name Address of New Registered Agent  19 Name Address of New Registered Agent  10 Name Address of New	ired ay Be
24 32073 25 DUVAL 29 32073 30 DUVAL Trust Fund Contribution Added to  9. Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent  11. Name and Address of New Registered Agent  12. Trust Fund Contribution Added to  13. Name and Address of New Registered Agent  14. Name Should Boy Kins  15. Name Should Boy Kins  16. Name Should Boy Kins  17. Name and Address of New Registered Agent  18. Name Should Boy Kins  19. Name Should	
HUBBS, WILLIAM D  4104 LENOX AV. SUITE 04  JACKSONVILLE FL 32205  198 Arof a blub 4th 401  JACKSONVILLE FL 32205  198 Arof a blub 4th 401  198 City	
4104 LENOX AV. SLITE 04  JACKSONVILLE FL 3205  198 Arci A 15/LVC 44 HO   82   Street Address (2.0. Box Number is Not Acceptable)  4104 LENOX AV. SLITE 04  JACKSONVILLE FL 3205  11. 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 reording or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registagent. I am (amiliar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  Signature, by led or private family and size if applicable.  (NOTE: Registand Agent affaiture registed when reinstating)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  TITLE    Delicities	
4104 LENOX AV. SLITE 04  JACKSONVILLE FL 3205  198 Arci A 15/LVC 44 HO   82   Street Address (2.0. Box Number is Not Acceptable)  4104 LENOX AV. SLITE 04  JACKSONVILLE FL 3205  11. 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 reording or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registagent. I am (amiliar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  Signature, by led or private family and size if applicable.  (NOTE: Registand Agent affaiture registed when reinstating)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  TITLE    Delicities	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508. Florids Statutes, the above-named corporation submits this statement for the purpose of changing its respirate or registered agent, or both, in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, I am (amiliar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  Signature, by led or pithed femily in pulse if applicable. (NOTE: Registered Agent agreed when reinstating)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  TITLE    Discrete of the provisions of Sections 617.0502 and 617.1508. Florids Statutes.	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508. Florids Statutes, the above-named corporation submits this statement for the purpose of changing its respirate or registered agent, or both, in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, I am (amiliar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  Signature, by led or pithed femily in pulse if applicable. (NOTE: Registered Agent agreed when reinstating)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  TITLE    Discrete of the provisions of Sections 617.0502 and 617.1508. Florids Statutes.	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508. Florids Statutes, the above-named corporation submits this statement for the purpose of changing its respirate or registered agent, or both, in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, I am (amiliar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  Signature, by led or pithed femily in pulse if applicable. (NOTE: Registered Agent agreed when reinstating)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  TITLE    Discrete of the provisions of Sections 617.0502 and 617.1508. Florids Statutes.	
11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Fiorida Statutes, the above-named corporation submits this statement for the purpose of changing its recoffice or registered agent, or both, in the State of Fiorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registagent. I am familiar with, and accept the obligations of, Section 617,0503, Florida Statutes.  SIGNATURE  Signature, by Sig	<u></u>
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Fiorida Statutes, the above-named corporation submits this statement for the purpose of changing its reoffice or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as regist agent. I am familiar with and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  Signature, by 65 or private familiar indications and site if applicable. (NOTÉ: Registered Agent sinature registed when reinstating)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  TITLE  DELETE  1.1 TITLE	ว็ร
SIGNATURE Signature, by led or printed familier of registery figent and title if applicable. (NOTE: Registrand Agent sphalture sphalted when relinetating)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  TITLE DELETE 11TITLE	alstered
SIGNATURE Signature, by led or printed families of registering Signature. By led or printed families of registering Signature and site of regi	ered
Signature, by led or printed fearlier or injusting agent and site if applicable. (NOTE Registered Agent of Status spalled when relinetating)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  TITLE D DELETE 11TILE Change	
12. OFFICE'S AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  TITLE D Change	
TITLE D DELETE 11TILE Change	IN 12
	Addition
	[] Monton
NAME BOYKINS, STEPHEN C  STREET ADDRESS 454 CRARAPPLE CT STE 1-A  STREET ADDRESS 198 Arola Blue Apt 1401	
A	
CITY-ST-ZIP ORANGE PARK FL 14CITY-ST-ZIP OFFANGE FOR FIRE 32073	
TITLE D Change	Addition
NAME JACOBS, JERRY L  22 NAME  11724 TYNDEL OBEEK DR	
STREET ADDRESS 11724 TYNDEL CREEK DR 23 STREET ADDRESS 77 MB 72 STREET ADDRESS	
STREET ADDRESS 11/24 IT NUEL CHEEK UM  CITY-ST-ZIP JACKSONVILLE FL 32205  23 STREET ADDRESS OF AND PARSE PARK F/A 3 20 73	_
TIME D Change	Addition
Constance I since.	<del>-</del> .
STREET ADDRESS 2204 HIDDEN WATERS DR. WEST 33 STREET ADDRESS 4550 Ramona Blud	
COPPER CONTROLLED TO ANALYSIS	
	Addition
*****   800003020148	_9
STREET ADDRESS \ \ 43 STREET ADDRESS \ -10/21/9901009004	••
CITY-ST-ZIP #####C1 OC #####C1	O.C.
TITLE DELETE SITTLE STATE	
NAME 52 NAME	Addition
STREET ADDRESS 6.3 STREET ADDRESS	Addition :
CITY-ST-ZIP 5.4 CITY-ST-ZIP	E) Addition
	E-Addition

CITY-ST-ZIP 14. 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 indicated on this annual report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; the 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 as Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS