State, April 4, etc.         State, Ap	FILE NOW: FILING FEE IS \$61.25						FILED		
ANNUAL REPORT Secure of Secure Comproducts Provide Provide Comproducts Provide Provide Comproducts Provide Provide Comproducts Provide Pro				FLORIDA DE	FLORIDA DEPARTMENT OF STATE		☐ Apr 04 1	<b>997 8:</b> 0	)0am
1997       DUSION OF CORPORATIONS         DOCUMENT # N940000004519 (4)         THE MARGARET JO BAKER PRIVATE FOUNDATION, INC.         Through Flace of Businesse       Mailing Address         SMM & OVEL       * BEAN & OVEL         SE PAKET DAK RD       * BEAN & OVEL         SE PAKET DAK RD       BOC ANTON F. SKR203         Director of Businesse       Pacing Address         SMM AG VE # 000       SUB AGE F. #000         Processing Flace of Business       Pach Mailing Address         SMM AG V # 000       SUB AGE F. #000         SMM AG V # 000       SUB AGE F. #000         SMM AG V # 000       SUB AGE F. #000         SMM AG V # 000       SUB AGE F. #000         SMM AG V # 000       SUB AGE F. #000         SMM AG V # 000       SUB AGE F. #000         SMM AG V # 000       SUB AGE F. #000         SMM AG V # 000       SUB AGE F. #000         SMM AG V # 000       SUB AGE F. #000         SMM AG V # 000       SUB AGE F. #000         SMM AG V # 000       SUB AGE F. #000         SMM AG V # 000       SUB AGE F. #000         SMM AG V # 000       SUB AGE F. #000         SMM AG V # 000       SUB AGE F. #000         SMM AG V # 0000       SUB AGE F. #000         <									
The MARGARET JO BAKER PRIVATE FOUNDATION, INC. The Margaret Job Baker		1997	a statest		•				cace
THE MARGARET JO BAKER PRIVATE FOUNDATION, INC.         "Inclusification of Business       Malling Address         Stand G. CALL D. F. MARGARET A SUB- Stand G. CALL D. F. MARGARET A SUB- Stand C. MARK RD. COLLECT O MARK RD. COLLECT O MARK RD. COLLECT O MARK RD. D. COLLECT O MARK RD. COLLECT O MARK RD. D. COLLECT O MARK RD. D.	DOCUI	MENT # N9	400000	4519 (	4)				
	THE M	ARGARET JO BAKEF	r private fo	UNDATION,	INC.		A TERNIDI DID VARA BIDIN DANI ATAL	Bolin Brin Cinh Bink Birth	
bit E MULETTO PARK RD.       400 E MULETTO PARK RD.         DCA RATOR FL 3542       BOOL ATION FL 35422         Direct of Business       2a.         Direct of Business       2a.         Direct of Business       2a.         Suite, Apt #, etc.       2a.         City & State       2b.         City & State       2b.         Direct of Business       2b.         City & State       2b.         City & State       2b.         Direct of Country       2b.         City & State       2b.         Direct of Country       2b.         City & State       2b.         Direct of Country       2b.         Direct of	Principal Place	e of Business	Mail	ling Address					
B. Det incorporated of cualified     B. Det incorporated of Details     B. Det incorporated of Details     B. Details					ak RD.				
	IOCA RATON F	FL 33432	BOC	A RATON FL 3343	2-5065		3. Date Incorporated or Qualified	3a. Date of Last R	
Sume, Not. # etc.         Sume, April # etc.         For B Additional           City & Statue         City & Statue         City & Statue         Item End Control         Added to Face           Zip         Zip         Zip         Sume, April # etc.         Statue         Statue         Item End Statute         Item End Statute         Added to Face           Sume, April # etc.         Res         The Control # etc.         Sume and Address of Current Registered Agent         Item End Statute         Item End Address of New Registered Agent         Item End Address of New Registered Agent <td></td> <td>lace of Business</td> <td></td> <td>Malling Address</td> <td></td> <td></td> <td>4. FEI Number</td> <td></td> <td>plied For</td>		lace of Business		Malling Address			4. FEI Number		plied For
City & State City		#, etc.		Suite, Apt. #, etc.				\$8.75	Additional
20       Country       20       Country       8       This corporation has facility for intrangible face under a right doct         9       Name and Address of Current Registered Agent       10. Name and Address of New Registered Agent       10. Name and Address of New Registered Agent         ASARCH, STEVEN J       11. Name and Address of New Registered Agent       10. Name and Address of New Registered Agent         ASARCH, STEVEN J       12. Name and Address of New Registered Agent       10. Name and Address of New Registered Agent         ASARCH, STEVEN J       12. Name and Address of New Registered Agent       10. Name and Address of New Registered Agent         11. Purpation to the provision of Sations 617.0002 and 617.1008 fixed Statutes.       10. Name and Address of Country Benefity Registered Agent         12. Purpation to the provision of Sations 617.0002 and 617.1008 fixed Statutes.       10. Name and Address of Country Benefity Registered Agent         13. Purpation to the provision of Sations 617.0002 and 617.0002 fixed Statutes.       10. Name and Address of Country Benefity Registered Agent         14. Purpation to the provision of Sations 617.0002 and 617.0003 Florids Statutes.       10. Statutes.       10. Statutes.         15. Purpation Sations Battered Agent and the statutes.       10. Statutes.       10. Statutes.       10. Statutes.         15. Purpation Sations Battered Agent and the statutes.       10. Statutes.       10. Statutes.       10. Statutes.	- ´	θ		City & State				\$5.00	May Be
B. Name and Address of Current Registered Agent     10. Name and Address of New Registered     10. Name     10. Name and Address of New Registered     10. Name     10. Name and Address of New Registered     10. Name     10. Name and Address of New Registered     10. Name				Zip	<u>}</u>	intry	8. This corporation has liability fo	r intangible tax under s	
ASARCH, STEVEN J 7777 GLADES RD. SUITE 200 BOCA RATON FL 33434				ered Agent	30				
7777 GLADES RD.         SUITE 200         BOCA RATION FL 33434         II. Pursuant to the provisions of Sections 617.0509, Porkia Statutes, the above-named corporation submits this statement for the provisions of Changing its registered agent. and an analysis of Section 617.0509, Porkia Statutes, the above-named corporation's board of directors. Thereby socept the spontument as registered agent. and analysis of Sections 617.0509, Porkia Statutes, Such change was authorized by the corporation's board of directors. Thereby socept the spontument as registered agent. and the state of Plories. Such change was authorized by the corporation's board of directors. Thereby socept the spontument as registered agent. and the state of Plories. Such change was authorized by the corporation's board of directors. Thereby socept the spontument as registered agent. and the state of the application register when inheriting.       DNE         SIGNATURE       IDELETE       11 Intel         BRIAN G. CAVELL       12 NME       12 NME         INE       PCD       DELETE       11 Intel         Intel Addition       35 S. OCCAN RUD, APT. 12D       23 SMEE ADDRESS         INE AGO CRATION FL       10 DELETE       11 Time         Intel Addition       35 S. OCCAN BLVD, APT. 12D       23 SMEE ADDRESS         INE AGORSS       35 S. OCCAN BLVD, APT. 12D       33 SMEE ADDRESS         INE AGORSS       35 S. OCCAN BLVD, APT. 12D       33 SMEE ADDRESS         INE AGORSS       35 SMEE ADDRESS       36 SMEE ADDRESS <tr< td=""><td></td><td>E OTEVIEN I</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr<>		E OTEVIEN I							
Source AUX BOCA RATION FL 33434	7777 GL	ADES RD.					ress (P.O. Box Number is Not Accept	3DI0)	
In       Processed to the provide of Sections 617 0562 and 617.1508. Florids Statutes, the above and corporation submits this statement for the purpose of Sections 617 0562 and 617.1508. Florids Statutes, the above and corporation submits this statement for the purpose of Sections 617 0562 and 617.1508. Florids Statutes.         Image: Lam term term submits with, and accept the obligations of, Section 617 0562, Ronda Statutes.       Image: Lam term term submits with, and accept the obligations of, Section 617 0562, Ronda Statutes.         Image: Lam term submits with, and accept the obligations of, Section 617 0562, Ronda Statutes.       Image: Lam term submits with, and accept the obligations of, Section 617 0562, Ronda Statutes.         Image: Lam term submits with, and accept the obligations of, Section 617 0562, Ronda Statutes.       Image: Lam term submits with, and accept the obligations of, Section 617 0562, Ronda Statutes.         Image: Lam term submits with, and accept the obligations of, Section 617 0562, Ronda Statutes.       Image: Lam term submits with, and accept term submits with and submits term submits with, and accept term submits with, an									
Signature, hyped or profiled name of Hogadawal agent and tile all applicable.       (NOTE: Requirement Agent algoritum tagents when shreating)       DATE         2.       OFFICERS AND DIRECTORS       13.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12         ITLE       PCD       CALL       DELETE       111 TILE       DATE         ITLE       PCD       DELETE       11 TILE       IDELETE       21 MAVE	DUCAN	MIUN FL 33434				84 City		FL 85 Zip	Códe
2.       OFFICERS AND DIRECTORS       13.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12         ITLE       PCD       DELETE       11 TITLE       Change       Addition         MAKE       BRIAN G. CAVELL       12 Move       13 STRET ADDRSS       13 STRET ADDRSS       13 STRET ADDRSS         MAKE       BOCA RATON FL       12 Move       13 STRET ADDRSS       12 Move       13 STRET ADDRSS         MAKE       MARGARET R. BAKER       22 Move       23 STRET ADDRSS       13 STRET ADDRSS       14 GTM: 51 2P         MAKE       MARGARET R. BAKER       24 GTM: 51 2P       24 GTM: 51 2P       10 Change       Addition         MAKE       STD       DELETE       21 TITLE       23 STRET ADDRSS       10 Change       Addition         MAR       GERRIT H. BAKER       350 S. OCEAN BLVD., APT. 12D       33 STRET ADDRSS       350 S. OCEAN BLVD., APT. 12D       33 STRET ADDRSS         MAKE       GERRIT H. BAKER       350 S. OCEAN BLVD., APT. 12D       34 GTM: 51 2P       10 Change       Addition         MAKE       GERRIT H. BAKER       350 S. OCEAN BLVD., APT. 12D       34 GTM: 51 2P       10 Change       Addition         MAKE       GERRIT H. BAKER       350 S. OCEAN BLVD., APT. 12D       34 GTM: 51 2P       10 Change       Addition	office or r agent. I a SIGNATURE					:	а. — А.		registered
BRIAN G. CAVELL     12 Make       Inter ADDRESS     490 E. PALMETTO PARK RD.       14 OTTY-ST-2P     DOCA RATION FL       Inter     VD       Inter ADDRESS     BOCA RATION FL       Inter ADDRESS     S50 S. OCEAN BLVD., APT. 12D       Inter ADDRESS     S40 TTY-ST-2P       BOCA RATION FL     DELETE       Inter ADDRESS     S40 TTY-ST-2P       Inter ADDRESS     S40 T	12.			the second s		d Agent signature requ			IS IN 12
Inter ADDRESS       490 E. PALMETTO PARK RD.       13 STREET ADDRESS         INT-SI-2P       BOCA RATON FL       14 OTT-SI-2P         INLE       VD       DELETE       21 TITLE         WARE       MARGARET R. BAKER       22 NAWE       23 STREET ADDRESS         STD       BOCA RATON FL       24 OTT-SI-2P       Change       Addition         WARE       STD       DELETE       21 TITLE       Change       Addition         INTEL ADDRESS       STD       DELETE       31 STREET ADDRESS       Change       Addition         INTEL ADDRESS       STD       DELETE       31 STREET ADDRESS       Change       Addition         INTEL ADDRESS       STD       DELETE       31 STREET ADDRESS       Change       Addition         INTEL ADDRESS       STD       32 STREET ADDRESS       Change       Addition         INTEL ADDRESS       STD       STREET ADDRESS       Change       Addition         INTEL ADDRESS       STD S. OCEAN BLVD., APT. 12D       33 STREET ADDRESS       Change       Addition         INTEL ADDRESS       STD S. OCEAN BLVD., APT. 12D       STREET ADDRESS       Change       Addition         INTEL ADDRESS       STD S. OCEAN BLVD., APT. 12D       STREET ADDRESS       STREET ADDRESS       STREET	TITLE			DELETE				Change.	Addition
Int-E       IA OTY-ST-ZP         BOCA RATON FL       IA OTY-ST-ZP         Inte       VD       DELETE         AME       MARGARET R. BAKER         INT-ST-ZP       2 XAME         BOCA RATON FL       2 XAME         Inter XNDRSS       350 S. OCEAN BLVD., APT. 12D         BOCA RATON FL       2 4 OTY-ST-ZP         INVE       BOCA RATON FL         INVE       CERNIT H. BAKER         INVE       STD         INVE       DELETE         STO       DELETE         STO       DELETE         INVE       STD         INVE       DELETE         STO       DE	NAME STREET ADDRESS		ARK RD				· ·		
MARE     MARGARET R. BAKER     22 NAME       Street ADDRESS     350 S. OCEAN BLVD., APT. 12D     23 STREET ADDRESS       BOCA RATON FL     24 GTY-ST-2P       ITLE     STD       MARE     GERRIT H. BAKER       Street ADDRESS     350 S. OCEAN BLVD., APT. 12D       JTLE     STD       ITLE     STD       Street ADDRESS     350 S. OCEAN BLVD., APT. 12D       JTL ST-2P     BOCA RATON FL       DELETE     31 STREET ADDRESS       JTL ST-2P     BOCA RATON FL       DELETE     41 TTLE       AME     35 STREET ADDRESS       STREET ADDRESS     34 GTY-ST-2P       ITLE     DELETE       41 GTY-ST-2P     Change       Addition     Addition       STREET ADDRESS     STREET ADDRESS       STREET ADDRESS     STREET ADDRE	CITY-ST-ZIP				140	- 1		· · · · · · · · · · · · · · · · · · ·	
IREET ADDRESS       350 S. OCEAN BLVD., APT. 12D       23 STREET ADDRESS         DTV-S1-2IP       BOCA RATON FL       2.4 CITY-ST-2IP         IREET ADDRESS       350 S. OCEAN BLVD., APT. 12D       33 STREET ADDRESS         IREET ADDRESS       350 S. OCEAN BLVD., APT. 12D       33 STREET ADDRESS         IREET ADDRESS       350 S. OCEAN BLVD., APT. 12D       33 STREET ADDRESS         IREET ADDRESS       350 S. OCEAN BLVD., APT. 12D       33 STREET ADDRESS         BOCA RATON FL	TITLE	· <del>-</del>	•	DELETE		· · · · · · · · · · · · · · · · · ·		Change	Addition
BOCA RATON FL       2.4 CITY-ST-ZP         ITLE       STD         IAME       GERRIT H. BAKER         350 S. OCEAN BLVD., APT. 12D       33 STREET ADDRESS         ITLE       JA. CITY-ST-ZP         ITLE       BOCA RATON FL         ITLE       JA. CITY-ST-ZP         BOCA RATON FL       A. CITY-ST-ZP         ITLE       JA. CITY-ST-ZP         ITLE       JA. CITY-ST-ZP         ITLE       JELETE         ITLE       JELETE         ITLE       JELETE         ITLE       JELETE         ITHE									
Intel       STD       DELETE       31 TITLE       Change       Addition         IAME       GERRIT H. BAKER       32 NAME       33 STREET ADDRESS       33 STREET ADDRESS       34 CITY-ST-2P       DELETE       41 TITLE       Change       Addition         ITLE       DELETE       41 TITLE       ITLE       Change       Addition         AME       DELETE       41 TITLE       Change       Addition         AME       ITLE       ITLE       ITLE       Change       Addition         AME       ITLE       ITLE       ITTLE       Change       Addition         AME       ITLE       ITLE       ITTLE       Change       Addition         AME       ITLE       ITLE       ITTLE	CITY - ST - ZIP		., /						
INTEET ADDRESS       350 S. OCEAN BLVD., APT. 12D       3.3 STREET ADDRESS         DIV-SI-ZP       BOCA RATON FL       DELETE         ITUE       ITUE       Addition         AME       4.0TY-SI-ZP       Change         ITHEET ADDRESS       4.3 STREET ADDRESS         ITUE       ITUE       Change         ITUE       ITUE       ITUE         ITUE       ITUE       <	TITLE	STD		DELETE				Change	Addition
DITY-SI-ZP       BOCA RATON FL       34. CITY-SI-ZP         ITLE       DELETE       4.1 TITLE       Change       Addition         AME       4.2 NAME       4.3 STREET ADDRESS       Addition         ITREET ADDRESS       4.4 CITY-SI-ZP       Change       Addition         ITREET ADDRESS       4.4 CITY-SI-ZP       Change       Addition         ITREET ADDRESS       4.4 CITY-SI-ZP       Change       Addition         ITREET ADDRESS       5.1 TITLE       Change       Addition         ITREET ADDRESS       5.3 STREET ADDRESS       STREET ADDRESS       STREET ADDRESS         ITTRE       DELETE       5.1 TITLE       Change       Addition         ITREET ADDRESS       5.4 CITY-SI-ZIP       Change       Addition         ITREE       DELETE       5.1 TITLE       Change       Addition         IAME       5.2 NAME       5.3 STREET ADDRESS       STREET ADDRESS       STREET ADDRESS         ITTLE       DELETE       6.1 STREET ADDRESS       Statutes.1 further certify that the information expopiled with this filing does not qualify for the exemption stated in Section 119.07(3)(I), Florida Statutes.1 further certify that the information export or supple: 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 trustee emp	NAME		40T 40D			· ·			
ITLE       DELETE       4.1 TITLE       Change       Addition         IXME       4.2 NAME       4.3 STREET ADDRESS       4.3 STREET ADDRESS       4.4 CITY-SI-ZIP         ITLE       DELETE       5.1 TITLE       Change       Addition         IXME       DELETE       6.1 TITLE       Change       Addition         IXME       DELETE       6.1 TITLE       Change       Addition         IXME       6.3 STREET ADDRESS       6.4 CITY-ST-ZIP       Change       Addition         IXME       0 DELETE       6.1 TITLE       Change       Addition         IXME       0 ACITY-ST-ZIP       0 ACITY-ST-ZIP       Change       Addition         IXME       0 DELETE       6.1 TITLE       0 Change       Addition <td></td> <td></td> <td>., APT. 120</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>			., APT. 120						
ATREET ADDRESS       43 STREET ADDRESS         DTY-ST-ZIP       14 CITY-ST-ZIP         ITLE       DELETE         STREET ADDRESS       52 NAME         STREET ADDRESS       53 STREET ADDRESS         DTY-ST-ZIP       54 CITY-ST-ZIP         ITLE       DELETE         STREET ADDRESS       53 STREET ADDRESS         DTY-ST-ZIP       54 CITY-ST-ZIP         ITLE       DELETE         STREET ADDRESS       53 STREET ADDRESS         DTY-ST-ZIP       54 CITY-ST-ZIP         ITLE       DELETE         STREET ADDRESS       63 STREET ADDRESS         STREET ADDRESS       63 STREET ADDRESS         UTY-ST-ZIP       Street ADDRESS         STACTY ST-ZIP       Street ADDRESS <td>TITLE</td> <td>DOUNTRIONTE</td> <td></td> <td>DELETE</td> <td></td> <td>·····</td> <td>······································</td> <td>Change</td> <td>Addition</td>	TITLE	DOUNTRIONTE		DELETE		·····	······································	Change	Addition
VITY-ST-ZIP       4.4 CITY-ST-ZIP         ITLE       DELETE         ITLE       STREET ADDRESS         STREET ADDRESS       5.3 STREET ADDRESS         DITY-ST-ZIP       5.4 CITY-ST-ZIP         ITLE       DELETE         BAME       5.3 STREET ADDRESS         DITY-ST-ZIP       5.4 CITY-ST-ZIP         ITLE       DELETE         BAME       6.1 TITLE         Change       Addition         MAME       6.2 NAME         STREET ADDRESS       6.3 STREET ADDRESS         STREET ADDRESS       6.3 STREET ADDRESS         STREET ADDRESS       6.4 CITY-ST-ZIP         IA L do hereby certify that the information opplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Plorida Statutes. I further certify that the information opplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Plorida Statutes. I further certify that the information of the corporation or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 15 if Change or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 15 if Change or corporation with an address.	NAME				4.21	IAME			
HLE       DELETE       5.1 TITLE       Change       Addition         IAME       5.2 NAME       5.3 STREET ADDRESS       5.3 STREET ADDRESS         DTY-ST-ZIP       5.4 CITY-ST-ZIP       5.4 CITY-ST-ZIP       Change       Addition         ITLE       DELETE       6.1 TITLE       Change       Addition         ITLE       DELETE       6.1 TITLE       Change       Addition         IAME       DELETE       6.1 TITLE       Change       Addition         IAME       0 ELETE       6.1 TITLE       Change       Addition         IAME       6.2 NAME       6.3 STREET ADDRESS       8.4 CITY-ST-ZIP       1         IA       1 do hereby certify that the information opplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Plorida Statutes. I further certify that the information indicated on this 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	STREET ADDRESS				4.3 \$	TREET ADDRESS			
HAME       52 NAME         STREET ADDRESS       53 STREET ADDRESS         DTY-ST-ZIP       54 (JTY-ST-ZIP         ITLE       DELETE         BAME       61 TITLE         IAME       62 NAME         IAME       63 STREET ADDRESS         IATY-ST-ZIP       64 (TY-ST-ZIP)         IA ddition       62 NAME         IATY-ST-ZIP       63 STREET ADDRESS         IATY-ST-ZIP       64 (TY-ST-ZIP)         IA DELETE       63 STREET ADDRESS         IATY-ST-ZIP       64 (TY-ST-ZIP)         IA OF INCOMPACING CONTRACT OF SUPPORT OF SUPORT OF SUPORT OF SUPORT OF SUPPORT OF SUPORT OF SUPORT OF SUPORT	CITY-ST-ZIP								
STREET ADDRESS       5.3 STREET ADDRESS         DITY-ST-ZIP       5.4 CITY-ST-ZIP         ITLE       DELETE         IAME       6.1 TITLE         IAME       6.2 NAME         ISTREET ADDRESS       6.3 STREET ADDRESS         ITTY-ST-ZIP       6.1 TITLE         IAME       6.3 STREET ADDRESS         IATY-ST-ZIP       6.3 STREET ADDRESS         IATY-ST-ZIP       6.4 CITY-ST-ZIP         IATY ST-ZIP       6.4 CITY-ST-ZIP         IATY ST-ZIP       6.4 CITY-ST-ZIP         IATY ST-ZIP       6.4 CITY-ST-ZIP         IATY ST-ZIP       6.4 CITY-ST-ZIP	THILE	1				· · · ·			
DELETE       54 CiTY-SI-ZIP         ITLE       DELETE         Addition         ITLE       61 TITLE         ITLE       62 NAME         63 STREET ADDRESS         ITT-SI-ZIP         ITLA       63 STREET ADDRESS         ITT-SI-ZIP									
TILE DELETE 6.1 TITLE Change Addition DELETE 6.1 TITLE Change Addition Change Addition Change Addition 6.2 NAME 6.3 STREET ADDRESS CALL STREET ADDRESS CALL STREET ADDRESS 6.4 CITY-ST-ZIP Change Addition 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP Change Addition 6.4 CITY-ST-ZIP CHANGE ADDRESS 6.4 CITY-ST-ZIP CHANGE ADDRESS 6.4 CITY-ST-ZIP CHANGE ADDRESS 6.4 CITY-ST-ZIP CHANGE ADDRESS CHANGE ADDRESS 6.4 CITY-ST-ZIP CHANGE ADDRESS 6.4 CITY-ST-ZIP CHANGE ADDRESS 6.4 CITY-ST-ZIP CHANGE ADDRESS 6.4 CITY-ST-ZIP CHANGE ADDRESS 6.4									
ITTY-SI-ZIP  6.3 STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-SI-ZIP 6.4 CITY-SI-ZIP 6.4 CITY-SI-ZIP 6.4 CITY-SI-ZIP 6.5 CITY-SI-ZIP 6.5 CITY-SI-ZIP 6.5 STREET ADDRESS 6.4 CITY-SI-ZIP 6.5 STREET ADDRESS 6.5 STRE	TITLE			DELETE				Change	Addition
107-SI-ZIP     64 CITY-SI-ZIP     64 CITY-SI-Z	NAME				6.2 M	AME			
14. I do hereby certify that the information opplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Porida Statutes. I further certify that the information indicated on this annual export or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under each; that I am an officer or director of the corporation or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 19 if Chapter 617, Florida Statutes.	STREET ADDRESS				6.3 9	TREET ADDRESS			
information indicated on this annual (sport or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under each; that I am an officer or director of the corporation or the very over trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 10 if change or or trustee the address.	CITY-ST-ZIP	nu postific that the information						an I futbor	
1 both a second production of a contraction of a contract		hy control that the information							
1 both a second production of a contraction of a contract	informatio	on indicated on this annual g	in supplied with this report or supplement	s filing does not o ptal annual repor	t is true and	exemption state accurate and the	ed in Section 119.07(3)(i), Florida Statu at my signature shall have the same leg	al effect as if made un	der oath; that
	informatic l am an o appears i	flicer or director of the corp Block 12 or Block 13 if ch	or supplied with this eport or supplement or ation or the regard supplement of att	s filing does not o ptal annual repor liver or trustee en tachment with ar	t is true and powered to address.	exemption state accurate and the execute this repo	ed in Section 119.07(3)(i), Florida Statu at my signature shall have the same legont as required by Chapter 617, Florida	pal effect as if made un Statutes; and that my r	ider oath; that name
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date Devine Phone # Accessory	informatic Lam an o appears i	n indicated on this annual of flicer or director of the corr in Block 12 or Block 13 if ch URE:	ation or the point of the point	ptal annual report ver or trustee en tachment with ar	t is true and powered to address.	accurate and the execute this repo	d in Section 119.07(3)(i), Florida Statu at my signature shall have the same ley on as required by Chapter 617, Florida 3/24/9	sal effect as if made un Statutes; and that my n 56/ 394 Devime Phone #	ider oath; that name 1860 /