NONPROFILE CORPORATION ANUAL REPORT 1999			DW: FILING F	EE IS \$61.25	•	FILED	
1999 ON-SIGN OF CORPORATIONS DOCUMENT # N96000000359	COR	RPORATION		Katherin	e Harris	· · · · · · · · · · · · · · · · · · ·	
DOCUMENT # N96000000359 Langmatin Mark Langmatin Mark KAYAKING FOR CANCER, INC. Principal Place of Business I1558 ALLAW YAY I1559 ALLAW YAY I	I	1999	A CONTRACTOR	DIVISION OF C	ORPORATIONS		
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1283 ALUNNI WAY SUTE 201 94 34CKSONWLLE FL 32246 94 17: 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 registered agent, or both, in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Statutes, the above-named corporation is board of directors; it hereby accept the appointment as registered agent, and accept the deligations of, Section Statutes, and accept the deligation of, Section Statutes, and accept the d		DONALD				dress (P.O. Box Number is Not Accentable)	
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14 I have by any the that the information available this films does not quality for the exemption stated in Section 119.07(3)(i) Florida Statutes I further certify that the information	JACKSON 11: Pursuant office or r agent:1 a SIGNATURE 12: TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	VILLE FL 32246 to the provisions of Sec egistered agent, or both m familiar with, and acc Signeture. typed or printed name O'LESSKER, CHARI 1853 MELROSE PL/ JACKSONVILLE FL SD FOX, BLAIR 4383 BATTLECREEI JACKSONVILLE FL VD HUSEMAN, RUSTY 4399 BATTLECREEI JACKSONVILLE FL	, in the State of Florida ept the obligations of, S a of registered agent and title if a FFICERS AND DIREC LES S ANTATION DR. 32223 K COURT W. 32258	Such change was au section 617.0503, Flori TORS	s, the above-named co thorized by the corpora da Statutes. Registered Agent signature requ 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 3.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4. CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME	rporation submits this statement for the purposition's board of directors. I hereby accept the ap ired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	Change Change Change Change Change Additic Change Additic
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 12 or Block 13 if changed or on an attach appropriate an address, with all other like empowered.	JACKSON 11: Pursuant office or r agent.1 a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	VILLE FL 32246 to the provisions of Sec egistered agent, or both m familiar with, and acc Signeture. typed or printed name C PTD O'LESSKER, CHARI 1853 MELROSE PLJ JACKSONVILLE FL SD FOX, BLAIR 4383 BATTLECREEI JACKSONVILLE FL VD HUSEMAN, RUSTY 4399 BATTLECREEI JACKSONVILLE FL VD HUSEMAN, RUSTY 4399 BATTLECREEI JACKSONVILLE FL	, in the State of Florida ept the obligations of, S a of registered egent and title if a FFICERS AND DIREC LES S ANTATION DR. 32223 K COURT W. 32258	Such change was au section 617.0503, Flori pplicable. (NOTE: TORS DELETE DELETE DELETE DELETE DELETE DELETE DELETE	s, the above-named co thorized by the corpora da Statutes. Registered Agent signature requ 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 3.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	rporation submits this statement for the purposition's board of directors. I hereby accept the an ined when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	- L a of changing its registered a of changing its registered Gamma Component as registered AND DIRECTORS IN 12 Change Addition Change Addition
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