FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N9700002755 (3)

May 05 1998 8:00am Secretary of State

Principal Plac		Mailing Address		·		
322 14TH ST. EAST BRADENTON FL 34208-1334 BRADENTON FL 34208-1334					3. Date Incorporated or Qualified 05/12/1997 4. FEI Number	Applied For
ľ					31-1567862	Not Applicable
2. Principal P	cipal Place of Business 2a. Mailing Address 26				5. Certificate of Status Desired	\$8.75 Additional Fee Required
Suite, Apt. #, etc.		Suite, Apt. #, etc.		6. Election Campaign Financing	\$5.00 May Be	
City & State		City & State		7. Is this nonprofit corporation a homeou	Added to Fees vners association?	
23	28		Onvento		Yes	
Zip 24	Country	Zip 3	Country		This corporation owes or has paid the Personal Property Tax due June 30.	current year Intangible Yes K No
	9. Name and Address of Curren				10. Name and Address of New Registe	
			81	Name		
WILLIAMS, TRUDY 322 14TH ST. EAST			82	Street	Address (P.O. Box Number is Not Acceptable)	
	11 ST. EAST ITON FL 34208-1334		83			
			84	City		85 Zip Code
11. Pursuant	to the provisions of Sections 617.050	2 and 617 1508. Florida Statutes	the abov	e-named		e of changing its registered
office or r	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was au ations of, Section 617.0503, Flori	thorized b	y the corp s.	corporation submits this statement for the purpos poration's board of directors. I hereby accept the	appointment as registered
SIGNATURE .					o reculted when reinstating) DA	
12.	Signature, typed or printed name of registered age OFFICERS AND		13.	ent signature	required when reinstating) DA' ADDITIONS/CHANGES TO OFFICERS	
TITLE	PD	☐ DELETE	1.1 TIFLE		Director	☐ Change ☑ Addition
NAME	WILLIAMS, JEFFREY M		1.2 NAME		St. John, Joe	[:
STREET ADDRESS	322 14TH ST. EAST		1.3 STREE	T ADORESS		
CITY-ST-ZIP	BRADENTON FL 34208-1334	Detere	1.4 CITY-1	ST-ZIP	814 Anderson Street	Change Addition
TITLE	VPD	☐ DELETE	2.1 TITLE		·	CT cusude CT vocition /
NAME STREET ADDRESS			2.2 NAME 2.3 STREE	t Annarce		
CITY-ST-ZIP			2.4 CITY-			
TITLE	TD DELETE 3.1 TO		3.1 TITLE			Change Addition
NAME	RICHARDS CARTER, NORMA		3.2 NAME]
STREET ADDRESS			3.3 STREE			İ
CITY-ST-ZIP			3.4. CITY- 4.1 TITLE	ST-ZIP		Change Addition
TITLE NAME	WILLIAMS BAISLEY, ANGELA	CT better	4.1 IIILE 4.2 NAME	l		The Company of the Co
STREET ADDRESS	1780 LEON RD., APT. 2115			T ADDRESS		į
CITY-ST-ZIP	JACKSONVILLE FL 32246		4.4 CITY-5	ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAME)
STREET ADDRESS			5.3 STREE			
CITY-ST-ZIP TITLE			5.4 CITY-1 6.1 TITLE	ST-ZIP		Change Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET	ADORESS		Ì
CITY-ST-ZIP	6.40		6.4 CITY - 5	ST-ZIP		
	artifut that the information ausplied wi	th this filing door not availby for	the evene	tion state	od in Contine 110 07/2\(ii) Florida Statuton I furthe	r partiful that the information

I hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an 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 attachment with an address.

SIGNATURE: Affer Mr. Illiam los Rellitudo M Marita Inc. 4-25-98 941-74