## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FI WALION FEI 36318		PORATION STATEMEN	(大学を) (大学など)		RTMENT OF ry of State corporations			• • •	FILE FILE FIAY 19 F	PA 5: 2		
2. Principal Office Address 724 N. EGL IN PROVIDE 150 3. Mailing Office Address 724 N. EGL IN PROVIDE 150 Solle, April 8. doc.  3. Mailing Office Address 724 N. EGL IN PROVIDE 150 Solle, April 8. doc.  3. Mailing Office Address 132 ELM AVE  Solle, April 8. doc.  4. Date Incorporated or Qualified To De Bulleties in Provide To De Bulleties To De B	· · · · · · · · · · · · · · · · · · ·							SEUK TALLA	etartur Massfe.	STATE FLORIO	<u>.</u> 	
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## ALTON FL 32548 FT WALTON FL 59-3687958 10312 FIN Application for 32548 USA 7. Name and Address of Current Registered Agent TANSON R CRUTCHFIELD Street Address (P.O. Box Number is Not Acceptable) 132 ELM AVE Suite. Apt. #, Elc. BUSA 132548 USA Suite. Busa	Suite, Apt. #,	, etc.										
29 32548 USA 32548 USA 32548 USA GERIFICATE OF STATUS DESIRED Street National Figure 1s Net Acceptable) 132 ELIM AVE Suita Apr. #, Etc. City FT WALTON FL 32548 8.1. being appointed the registered agent of the above payed corporation, am familiar with and accept the obligations of section 607,0505 or 617,0503, F.S. Signature of Registered Agent REGISTERED AGENMUST SIGN 9. Names and Street Addresses of Each Officer and/or Directors Officers and/or Directors	City & State City & State						5. FEI Numb		711	8 200		
7. Name and Address of Current Registered Agent    Name				+ <del>* </del>	<del>`                                      </del>	<u></u>		958 1			· · –	
Sureal Address (P.O. Box Number is Not Acceptable)  132 ELM AVE  Sute. Apt. If. Etc.  B  City  FT WALTON  6. 1. being appointed the registered agent of the above payed corporation, am familiar with and accept the obligations of section 607 0505 or 617.0503, F.S.  Signature of Registered Agent  AREGISTERED AGESTANUST SIGN  9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)  Titles  Officers and/or Directors  Titles  Officers and/or Director  Officers and/or Director  Titles  Officers and/or Director  Officers and/or Director  Officers and/or Director  Officers and/or Director  Titles of ANSON R CRUTCHFIELD  132 BELM AVE  F1 WALTON FL 32548  10. Learly that I am an officer or director or the receiver or trustee empowered to execute this application, her reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of Individuals listed on this form on ort qualify or an exemption under section 119.07(3)(), F.S. The information indicated on this application, is true and accurate, and my signetting shall have the same legal effect as if made under oath.  SIGNATURE: Associated the components of the control of the control of the components of the control of the cont	3254	18	USA	32548	USA			E OF STATU	S DESIRED 🔲 P			
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SIGNATURE AND TYPEITOR PRINTED NAME/OF SIGNING OFFICED OF DIDECTOR Date 1 Dation Discussion Discuss	owed by on this a	y the corporation application is true	have been paid and the and accurate, and my s	names of individuals listed ignature shall have the sar	on this form do n ne legal effect as	ot qualify for a if made under	n exemption und		119.07(3)(i), F.S. 4 85	The informa	tion indicated	

Dear Madam, Var writing This in response to out telephone - Conservation of 5-14-04: I respectfully request that any corporation document Jees be civilled to provide my TEI mender,

that I had pilad to provide my TEI mender,

kowever, my check did clear the State. Dut

to lack of correspondance I was not accore that you

were not in receipt of the required information. CRUTCHFIELD ENTERPRISES