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l '	ce of Business IPS HIGHWAY LE FL 32256	, ,	Mailing Address. 11750 PHILLIPS HIGHWAY JACKSONVILLE FL 32256					i de ministration (del 1			The second secon
									and the second	ACCOMPANY OF	Mental Property of the
	Place of Busines: Favor Dy .#, etc.		3. Mailing Address 715 Favor Dykes Rd. Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE					# 1 to 1 t
St. Augustine, Fl.			St. Augustine, F1.			4. FEI Number 59 3654686   Applied For Not Applicable			CONTRACTOR	200000000000000000000000000000000000000	A CONTRACTOR
32086	Zip Country		Zip Country  32086 US		5. Certificate of Status Desired See Required  7. Name and Address of New Registered Agent			ger (skileton e de signe) ger (des signe) ger (des signe)	The first feet of the first feet of the fe	\$44.725 Odd 19.	
MORRIS, ANDREW.W  Name Carolyn E. Mathis · Morris  Street Address (P.O. Box Number is Not Acceptable)  11750 PHILLIPS HIGHWAY								2		Anticipan	
JACKSONVILLE FL 32256									Approximation of the second	Special Control	Agenta on the
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.									and the second	1.00 W.A.P.	and the second
SIGNATURE Signature, typed or philod name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE											A COMPANY OF THE PARTY OF THE P
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (Sea criteria on back)  FILE NOW!!! FEE IS \$550.00  After September 12, 2001 Fee will be \$750.00 Make Check Payable to Department of State  10. Election Campaign Financing Trust Fund Contribution.								de la companya de la			
11.		OFFICERS AND D	IRECTORS	12.		DITIONS/CHANGES TO C					3
TITLE NAME STREET ADDRESS CITY-ST-ZIP		ECHER W IPS HIGHWAY LLE FL 32256	<b>⊠</b> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Pres. Caroly 715 St. A	FAVOR DYKES	is-Morris 5 Rd. FL. 32.086	Addition	2E034 (5/01)		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	WORRIS, AN	DREW W DYKES ROAD TNE FL 32086	<b>⊯</b> Celete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		000004	□ Change 679730- /0101099C *61.25 ******	<b>4</b> : ==  01	CR	Anna Carlo Car	
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13. 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 information indicated on this report or supplemental 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 the receiver or trustee emerging of the execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed or on an attachment with an artifest with all other like removered.											Seguina seguina de la companya de la
SIGNATURE:  SIGNATURE:  SIGNATURE AND OFFE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  Date  Date  Date  Date  Descriptions  Descriptions											79, 487 (C)