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12. I hereby certify that the information supplied with this filing does not qual indicated on this report or supplemental report is true and accurate and t of the corporation or the receiver or trustee empowered to execute this re changed, or on an attachment with an address, with all other tike empower	lify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the informat that my signature shall have the same legal effect as if made under oath; that I am an officer or dire aport as required by Chapter 507, Florida Statutes; and that my name appears in Block 10 or Block ered.