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ZENESKI, GRÉGÓRY E Image: Street Address (P.O. Box Number is Not Acceptable) 1950 WILLOW BEND CRCLE, #103 Street Address (P.O. Box Number is Not Acceptable) Image: Character address of the statement for the purpose of charaging its registered agent, or both, in the State of Portia. I am familiar with, and accept the objection of registered agent. SKINATURE Street Address (P.O. Box Number is Not Acceptable) Image: Character address of the statement for the purpose of charaging its registered agent, or both, in the State of Portia. I am familiar with, and accept the objection of registered agent. SKINATURE Street Address (P.O. Box Number is Not Acceptable) Image: Character address of the statement of the purpose of charaging its registered agent, or both, in the State of Portia. I am familiar with, and accept the objection of registered agent. SKINATURE Street Address (P.O. Box Number is Not Acceptable) Image: Provide to Fordal Department of State Note State Image: Provide to Fordal Department of State Image: Provide to Fordal Department of State Image: Provide to Fordal Department of State Image: Provide to Fordal Department of State Image: Provide to Fordal Department of State Image: Provide to Fordal Department of State Image: Provide to Fordal Department of State Image: Provide to Fordal Department of State Image: Provide to Fordal Department of State Image: Provide Department of Sta		6. Name and Address of Current	Registered Agent	.I.	l		
A. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Surveys, speed or primes amy digited agent and the # applicate (mOTE Registered Agent stipulate required when surveys and motions) (mOTE Registered Agent stipulate required when surveys and motions) (mote florida prime and stigulated agent, or both, in the State of Florida. (mote stipulate required when surveys and motions) (mote florida prime agent and the # applicate (mote florida prime agen	1960 WIL	LOW BEND CIRCLE, #103				O. Box Number is Not Acceptable)	
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Inte	TITLE NAME STREET ADORESS	PD ZENESKI, GREGORY E 1960 WILLOW BEND CIRCLE, #1 NAPLES FL 34109		TITLE NAME STREET ADDRESS	617 No	TO IGAVE NIN	
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12. Thereby certify that the information explicitly this filling does not qualify for the exemption stated in Section 119 07/2001 Elected State 14 there is the state of the section of th	NAME STREET ADDRESS CITY - ST-ZIP			NAME STREET ADDRESS CITY-ST-ZIP			
12. I hereby certify that the information explied 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an officers, with all other like empowered. SIGNATURE: SIGNATURE: Determine present of Statutes of Statu	changed, o	URE:			ated in Secti nave the sar apter 607, F	1/27/03	