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Apr 25, 2007 8:00 am
Secretary of State

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4. FEI Number 54-2178716	Applied For
	Not Applicable

7. Name and Address of New Registered Agent

☐ Box Number is Not Acceptable)

FL	Zip Code
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City & State		City & State	
Zip	Country	Zip	Country

7. Name and Address of New Registered Agent

Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	<div> <div>FL</div> <div>Zip Code</div> </div>

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
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SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/20/07
Date Daytime Phone #