

FILED

[illegible]

3. Date Incorporated or Qualified 09/20/1989		3a. Date of Last Report 05/01/1996	
4. FEI Number 04-2104736		Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/>	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
10. Name and Address of New Registered Agent			
(P.O. Box Number is Not Acceptable) State FL Zip Code 85 Corporation submits this statement for the purpose of changing its registered agent on its board of directors. I hereby accept the appointment as registered agent when reinstating) 3-11-97 DATE			
ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
WILSON, CAROLE		<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
05 STEARNS HILL RD			
WILKINSON, MA 02154		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
in Section 119.07(3)(i), Florida Statutes. I further certify that the signature shall have the same legal effect as if made under oath; that as required by Chapter 617, Florida Statutes; and that my name			

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