## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## 1999 DOCUMENT # P41037

1. Corporation Name

VAN ARNEM COMPANY

**FILED** May 01, 1999 8:00 am Secretary of State 05-01-1999 90078 002 \*\*\*150.00



| Mailing Address   Mailing Address   DO NOT WRITE IN THIS SPACE    3. Detail incorporation of Qualified   1/0/20/1892    2. Principal Place of Business   2a. Mailing Address   4. FEI Number   Applied For   Applied |  | •  |  |                                |                  |  |                    |                    | // <b>// // // // // // // // // //</b> |
|--|--|--|--|--------------------------------|------------------|--|--------------------|--------------------|---|
| DEERFIELD BEACH FL 3342 US  3. Dest incorporated of Qualified 10/20/1992  2. Principal Place of Susiness  2. Mailing Andress 2. April 49th 2 28  | Principal Place of Business Mailing Address          |  |  |                                |                  | 1 (84)(84) (1) \$188) (104) \$400          | .aita 140) 019t4 0 | 1611 81911 91811 9 | Seri Bies (40)                          |
| US    Solida   Process   Solida   Solid | 1301 W. NEWPORT CENTER DRIVE 1301 W. NEW PORT CENTER |  |  |                                |                  |  |                    |                    |   |
| 2. Principal Place of Business 2. Principal Place of Business 2. Principal Place of Business 2. Sulfa, Apt. 8, etc. 2. City & State 3. December of Principle Place of Status Desired 3. Election Campaign Financing State of Status Desired 4. Election Campaign Financing State of Status Desired 5. Sufficient Campaign Financing State of Status Desired Status  |  | ACH FL 33442   | =  | =                              |                  | DO NOT WRITE IN THIS SPACE                 |                    |                    |   |
| 2. Principal Piloso of Business   2. Mailing Address   3. Edition Companies   3. Applied For   3. South, Apt. 8, etc.   27   3. Edition of Status Desired   5. Certification of Status Desired Address of Now Registered Agent   5. Certification of Status Desired Address of Now Registered Agent   5. Certification of Status Desired Desired   5. Certification of Status Desired Des   | 00   | *  | 00   |                                |                  | 3. Date Incorporated or Qualifed           |                    |                    |   |
| Sulfa, Apt. 9, etc.  |  | •  |  |                                |                  | 10/20/1992                                 |                    |                    |   |
| Sulte, Apt. #, etc.    Sulte, Apt. #, etc.   27  | Principal Place of Business     2a. Mailing Address  |  |  |                                |                  |  |                    | Api                | plied For                               |
| City & State   | 21   |  | 26   |                                |                  | 38-2331309                                 |                    | No                 | t Applicable                            |
| Trust Fund Contribution   Added to Fees  | Suite, Apt.  | #, etc.  | — · · · ·  |                                |                  | 5. Certifcate of Status Desired            |                    |                    |   |
| 28   Zip   Zip   Zip   Country   Zip   Country   Zip   Country   S. This corporation was the current year Indingable   Personal Property Tax.   Yis   Molecular Press   Mole   | City & State   | е  | City & State   | ····                           |                  | 6. Election Campaign Financing             |                    | \$5.00             | May Be                                  |
| Section 20   28   29   30   Personal Property Tax   'Yes   No  | 23   |  | 28   | 8                              |                  | Trust Fund Contribution                    |                    | Added to           | o Fees                                  |
| S. Name and Address of Curront Registered Agent  MCKNIGHT, N. PHILIP 1301 WEST NEWPORT CENTER DRIVE DEERFIELD BEACH FL 33442  14 City  15 Steel Address (P.O. Box Number is Not Acceptable)  15 Steel Address (P.O. Box Number is Not Acceptable)  16 Steel Address (P.O. Box Number is Not Acceptable)  17 Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent. I am finalle with, and accept the obligations of Section Sections 607 0500, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent. I am finalle with, and accept the obligation of Section Section 5000, Florida Statutes.  16 City  17 FL  18 City  18 City  18 City  18 City  18 City  19 City  19 City  19 City  10 City  10 City  10 City  11 City  12 City  13 City  14 City  15 Statement for the purpose of changing its registered of directors. I heroby accept the appointment as registered agent. I am finalle with, and accept the obligation of Section Statutes.  19 City  10 City  10 City  11 City  12 City  13 City  14 City  15 Statement of the purpose of changing its registered agent. I am finally with a statement for the purpose of changing its registered agent. I am finally with a statement for the purpose of changing its registered agent. I am finally with a statement for the purpose of changing its registered agent. I am finally with a statement for the purpose of changing its registered agent. I am finally with a statement for the purpose of changing its registered agent. I am finally with a statement for the purpose of changing its registered agent. I am finally with a statement for the purpose of changing its registered agent. I am finally with a statement for the purpose of changing its registered agent. I am finally with a statement for the purpose of changing its registered agent. I am finally with a statement for the purpose of chan | Zip  | Country  | Zip  |                                | y                | 1  | rent year Int      | _                  |   |
| MCKNIGHT, N. PHILIP  1301 WEST NEWPORT CENTER DRIVE DEERFIELD BEACH FL 33442  33  34 City  FL 85 Zip Code  11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Fiorida Statutes.  12. Or Fire Care Support of English appointment of the purpose of changing its registered agent, or both, in the State of Florida, Such change was suthorted by the corporation's board of directors. I hereby accept the appointment as registered agent, and familiar with, and accept the obligations of, Section 607,0505, Fiorida Statutes.  SIGNATURE  Significant, typic or ported name of impaired agent and the fingulated provided by the corporation's board of directors. I hereby accept the appointment as registered agent agent significant in the purpose of changing its registered agent agent significant in the purpose of changing its registered agent  | 24   |  |  | 30                             |                  |  |                    |                    | LJNo                                    |
| MCKNIGHT, N. PHILIP 1301 WEST NEWPORT CENTER DRIVE DEERFIELD BEACH FL 33442  82 Street Address (P.O. Box Number is Not Acceptable)  83   |  | 9. Name and Address of Curr  | ent Registered Agent   |                                |                  | 10. Name and Address of New                | Registered         | Agent              |   |
| 13.01 WEST NEWPORT CENTER DRIVE DEERFIELD BEACH FL 33442  13. Bad City  FL 85 Zip Code  11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florids, Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent, and familiar with, and accept the obligations of, Section 607,6505, Florida Statutes.  SIGNATURE  Signature, lyred or printer image of highester agent and the if replacesion. [MOTE Inappates Agent asynthe required when reinstring)  12. OFFICERS AND DIRECTORS  13. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  COD  VAN ARNEM, HAROLD L  1301 W. NEWPORT CENTER DRIVE  1301 W. NEWPORT CENTER DRIVE  13. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12.  14. CITY-ST-2P  TITLE  DEERFIELD BEACH FL  15. TITLE  10. Change   Addition  MCKNIGHT, N. PHILIP  10. Change   Addition  MCKNIGHT, M. PHILIP  10. Change   Addition  MCKNIGHT, M. PHILIP  10. Change   Addition   | HOV  | ANCHE N. DUBLID.   |  | 8,                             | Name             |  |                    |                    | ł                                       |
| 11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florids Statutes. The above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and accept the obligations of, Section 607 0505, Florida Statutes.  SIGNATURE  Signature, typical or portical name of ingitizened agent and title if applicable.  12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE COD DELETE 1.1 TITLE 1.2 DELETE 1.2 TITLE 1.2 DELETE 1.3 TITLE 1.2 DELETE 1.3 TITLE 1.2 DELETE 1.3 TITLE 1.2 DELETE 1.3 STREET ADDRESS 1.3 STREET |  |  |  | 82                             | Street A         | Address (P.O. Box Number is Not Accept     | able)              |                    |   |
| The provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Statutes.    Signature, typical or profited name of registered agent and tost if appointment as registered agent, or both, in the State of Florida. Statutes.    Signature, typical or profited name of registered agent and tost if appointment as registered agent, or both, in the Statutes.   Signature, typical or profited name of registered agent and tost if appointment as registered agent, or both, in the Statutes.   The Interest of Interest agent agent and tost if appointment as registered agent, or both, in the Statutes.   | DEE  | RFIELD BEACH FL 33442  |  | 83                             | 3                |  |                    |                    |   |
| The provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Statutes.    Signature, typical or profited name of registered agent and tost if appointment as registered agent, or both, in the State of Florida. Statutes.    Signature, typical or profited name of registered agent and tost if appointment as registered agent, or both, in the Statutes.   Signature, typical or profited name of registered agent and tost if appointment as registered agent, or both, in the Statutes.   The Interest of Interest agent agent and tost if appointment as registered agent, or both, in the Statutes.   |  |  |  | 84                             | City             |  |                    | 85 Zip C           | Code                                    |
| office or registered agent, or both, in the State of Floride, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent agent and familiar with, and accept the obligations of, Section 607/05/05/05/10/16/35/11/10/16/11/11/11/11/11/11/11/11/11/11/11/11/  |  |  |  | )                              | )                |  |                    | -1.                |   |
| 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE COD  | office or nagent. I as                               | egistered agent, or both, in the Sta<br>m familiar with, and accept the obli | e of Florida. Such change was a<br>gations of, Section 607.0505, Flo | authorized by<br>orida Statute | the carpai       | ration's board of directors. I hereby acce | opt the appoi      | ntment as rec      | gistered                                |
| TITLE COD VAN ARNEM, HAROLD L 12 NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS SA CITY-ST-ZIP  STREET ADDRESS SA CITY-ST-ZIP  STREET ADDRESS SA CITY-ST-ZIP  TITLE NAME STREET ADDRESS SA CITY-ST-ZIP  STREET ADDRESS SA CI |  | _ <del></del>  |  | _ <del>_</del> _               | nt agriature ret |  |                    | ID DIRECTO         | RS IN 12                                |
| NAME VAN ARNEM, HAROLD L STREET ADDRESS 1301 W. NEWPORT CENTER DRIVE DEERFIELD BEACH FL TITLE PD MCKNIGHT, N. PHILIP STREET ADDRESS 1301 W. NEWPORT CENTER DR. CITY-ST-ZIP DEERFIELD BEACH FL  STREET ADDRESS 1301 W. NEWPORT CENTER DR. CITY-ST-ZIP DEERFIELD BEACH FL  STREET ADDRESS CITY-ST-ZIP TITLE ST ALLEN, BETTY E. 1301 W. NEWPORT CENTRE DR. CITY-ST-ZIP TITLE ALLEN, BETTY E. 1301 W. NEWPORT CENTRE DR. DEERFIELD BEACH FL  STREET ADDRESS CITY-ST-ZIP TITLE DEERFIELD BEACH FL  STREET ADDRESS CITY-ST-ZIP TITLE DELETE  STREET ADDRESS CITY-ST-ZIP TITLE DELETE  STREET ADDRESS CITY-ST-ZIP TITLE DELETE STREET ADDRESS CITY-ST-ZIP TITLE DELETE STREET ADDRESS STREET ADRESS STREET ADDRESS STREET ADRESS STREET ADDRESS STREET ADDRES |  | <del></del>  |  |                                | <u>_</u>         | 7,5517,07,6161,117,624,73 (                |                    |                    |   |
| STREET ADDRESS CITY-ST-ZIP DEERFIELD BEACH FL TITLE PD DELETE DELETE DELETE DELETE DELETE DOLLETE DOLL |  |  |  |                                |                  |  | *                  |                    |   |
| CITY-ST-ZIP  DEERFIELD BEACH FL  TITLE  PD  DELETE  2.1 TITLE  PD  DECETE  2.1 TITLE  PD  DECETE  2.1 TITLE  2.2 NAME  3.3 STREET ADDRESS  CITY-ST-ZIP  DEERFIELD BEACH FL  3.2 NAME  3.3 STREET ADDRESS  CITY-ST-ZIP  DEERFIELD BEACH FL  DELETE  3.4 CITY-ST-ZIP  DEERFIELD BEACH FL  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP  DEERFIELD BEACH FL  DELETE  DELETE  4.1 TITLE  1.2 ST  Addition  NAME  STREET ADDRESS  CITY-ST-ZIP  DELETE  DELETE  1.4 CITY-ST-ZIP  DELETE  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  DELETE  5.1 TITLE  1.4 CITY-ST-ZIP  DELETE  4.1 TITLE  1.5 ST  Addition  Addition  Addition  Change  Addition  Addition  Addition  Change  Addition  Addition  Change  Addition  Addition  Change  Addition  Addition  Addition  Addition  NAME  STREET ADDRESS  SA CITY-ST-ZIP  TITLE  DELETE  5.1 TITLE  5.2 NAME  5.3 STREET ADDRESS  5.4 CITY-ST-ZIP  TITLE  DELETE  6.1 TITLE  NAME  STREET ADDRESS  STREET ADDR | 1  |  |  |                                | T ADDRESS        |  |                    |                    | 1                                       |
| TITLE PD   | 1  |  |  | 1                              |                  |  |                    |                    |   |
| NAME STREET ADDRESS CITY-ST-ZIP TITLE ST ALLEN, BETTY E. 1301 W. NEWPORT CENTRE DR. DEERFIELD BEACH FL  STREET ADDRESS CITY-ST-ZIP TITLE  ST ALLEN, BETTY E. 1301 W. NEWPORT CENTRE DR. DEERFIELD BEACH FL  STREET ADDRESS CITY-ST-ZIP TITLE  NAME STREET ADDRESS CITY-ST-ZIP TITLE  DELETE  D |  |  |  |                                | -                |  |                    | ☐ Change           | Addition                                |
| STREET ADDRESS CITY-ST-ZIP DEERFIELD BEACH FL  ST ALLEN, BETTY E. 1301 W. NEWPORT CENTRE DR. DEERFIELD BEACH FL  STREET ADDRESS CITY-ST-ZIP DEERFIELD BEACH FL  STREET ADDRESS CITY-ST-ZIP DEERFIELD BEACH FL  STREET ADDRESS CITY-ST-ZIP DELETE  ALLEN, BETTY E. 32 NAME 33 STREET ADDRESS CITY-ST-ZIP DELETE  ALLEN, BETTY E. 32 NAME 33 STREET ADDRESS CITY-ST-ZIP DELETE  ALLEN, BETTY E. 32 NAME 33 STREET ADDRESS CITY-ST-ZIP DELETE  ALLEN, BETTY E. 32 NAME 33 STREET ADDRESS CITY-ST-ZIP TITLE  ALLEN, BETTY E. 32 NAME 33 STREET ADDRESS CITY-ST-ZIP TITLE  ALLEN, BETTY E. 32 NAME 33 STREET ADDRESS CITY-ST-ZIP TITLE  ALLEN, BETTY E. 32 NAME 33 STREET ADDRESS CITY-ST-ZIP TITLE  ALLEN, BETTY E. 32 NAME 34 CITY-ST-ZIP TITLE  ALLEN, BETTY E. 34 CITY-ST-ZIP TITLE  ALLEN, BETTY E. 34 CITY-ST-ZIP TITLE  Change Addition Addition Change Chang | -  |  |  | 2.2 NAME                       |                  | ·  |                    |                    | İ                                       |
| CITY-ST-ZIP  DEERFIELD BEACH FL  ST  ALLEN, BETTY E.  STREET ADDRESS CITY-ST-ZIP  DEERFIELD BEACH FL  DELETE  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS CITY-ST-ZIP  DELETE  3.4 CITY-ST-ZIP  DELETE  4.1 TITLE  4.2 NAME  4.2 NAME  4.3 STREET ADDRESS CITY-ST-ZIP  DELETE  5.1 TITLE  NAME  STREET ADDRESS CITY-ST-ZIP  DELETE  DELETE  5.1 TITLE  NAME  STREET ADDRESS CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  | ,  | ARCA ME ANTIGODE OFFICER DO  |  | 2.3 STREE                      | ET ADDRESS       |  |                    |                    | )                                       |
| TITLE  NAME  ALLEN, BETTY E.  STREET ADDRESS  CITY-ST-ZIP  DELETE  DELETE  ALLEN, BETTY E.  32 NAME  33 STREET ADDRESS  CITY-ST-ZIP  DELETE  DELETE  ALTINE  32 NAME  33 STREET ADDRESS  AL CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  DELETE  STREET ADDRESS   | ĺ  |  |  |                                |                  | - ZIP                                      |                    |                    |   |
| NAME STREET ADDRESS CITY-ST-ZIP DEERFIELD BEACH FL DELETE  |  |  | <b>₩</b> DELETE  |                                |                  | ST. Service                                |                    | Change             | Addition                                |
| CITY-ST-ZIP  DEERFIELD BEACH FL  3.4. CITY-ST-ZIP  DELETE  4.1 TITLE  A.2 NAME  4.2 NAME  4.3 STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  4.4 CITY-ST-ZIP  A.4 CITY-ST-ZIP  TITLE  DELETE  5.1 TITLE  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  5.3 STREET ADDRESS  SA CITY-ST-ZIP  TITLE  DELETE  6.1 TITLE  DELETE  6.3 STREET ADDRESS   | Î  | •  |  |                                | ;                | Julia M. DECKER                            | · aa-4             | 2- 16              | ا سین د                                 |
| DEERFIELD BEACH FL   | ,  |  |  | 3.3 STREE                      | TADDRESS .       | 1301 M. Newborn                            | 1 m                |                    | 100                                     |
| TITLE         DELETE         4.1 TITLE         Change         Addition           NAME         4.2 NAME         4.3 STREET ADDRESS         CITY-ST-ZIP         CTTY-ST-ZIP         TITLE         Change         Addition           NAME         5.1 TITLE         Change         Addition           NAME         5.3 STREET ADDRESS         STREET ADDRESS         CITY-ST-ZIP           TITLE         DELETE         6.1 TITLE         Change         Addition           NAME         6.3 STREET ADDRESS         STREET ADDRESS         STREET ADDRESS         STREET ADDRESS         STREET ADDRESS   | i  |  | <b>5</b> 7   |                                |                  | DEERHIELD BEACH                            | 71:                | 33 44              | 12                                      |
| NAME       4.2 NAME         STREET ADDRESS       4.3 STREET ADDRESS         CITY-ST-ZIP       4.4 CITY-ST-ZIP         TITLE       DELETE       5.1 TITLE         NAME       52 NAME         STREET ADDRESS       5.3 STREET ADDRESS         CITY-ST-ZIP       5.4 CITY-ST-ZIP         TITLE       DELETE       6.1 TITLE         NAME       6.2 NAME         STREET ADDRESS       5.3 STREET ADDRESS   |  |  | ☐ DELETE   |                                |                  | <del></del>                                |                    | Change             | ☐ Addition                              |
| STREET ADDRESS         4.3 STREET ADDRESS           CITY-ST-ZIP         4.4 CITY-ST-ZIP           ITILE         Change         Addition           NAME         5.1 NAME         STREET ADDRESS           CITY-ST-ZIP         5.4 CITY-ST-ZIP         CITY-ST-ZIP           ITILE         DELETE         6.1 ITILE         Change         Addition           NAME         6.3 STREET ADDRESS         STREET ADDRESS         STREET ADDRESS  | •  |  |  | 4.2 NAME                       |                  |  |                    |                    | .                                       |
| CITY-ST-ZIP         4.4 CITY-ST-ZIP           TITLE         Change         Addition           NAME         52 NAME           STREET ADDRESS         5.3 STREET ADDRESS           CITY-ST-ZIP         54 CITY-ST-ZIP           TITLE         DELETE         6.1 TITLE           NAME         6.2 NAME           STREET ADDRESS         6.3 STREET ADDRESS   |  | •  |  | 4.3 STREE                      | TADDRESS         |  |                    |                    |   |
| TITLE         DELETE         5.1 TITLE         Change         Addition           NAME         52 NAME         STREET ADDRESS         STREET ADDRESS         STREET ADDRESS         CITY- ST-ZIP         CITY- ST-ZIP         CITY- ST-ZIP         Change         Addition           NAME         6.1 TITLE         Change         Addition           NAME         6.3 STREET ADDRESS         STREET ADDRESS         CITY- ST-ZIP   |  |  |  | 4.4 CITY-                      | ST-ZIP           |  |                    |                    |   |
| NAME         52 NAME           STREET ADDRESS         5.3 STREET ADDRESS           CITY- ST-ZIP         54 CITY- ST-ZIP           TITLE         DELETE         6.1 TITLE         Change         Addition           NAME         6.2 NAME         STREET ADDRESS         6.3 STREET ADDRESS   |  |  | ☐ DELETE   |                                | · -              |  |                    | Change             | ☐ Addition                              |
| STREET ADDRESS         5.3 STREET ADDRESS           CITY- ST-ZIP         5.4 CITY- ST-ZIP           TITLE         DELETE         6.1 TITLE         Change         Addition           NAME         6.2 NAME         STREET ADDRESS         6.3 STREET ADDRESS   |  |  |  | 5.2 NAME                       | ļ                |  |                    |                    | 1                                       |
| CITY-ST-ZIP         54 CITY-ST-ZIP           TITLE         Change         Addition           NAME         62 NAME           STREET ADDRESS         6.3 STREET ADDRESS  |  |  |  | 5.3 STREE                      | T ADDRESS        |  |                    |                    |   |
| TITLE DELETE 6.1 TITLE Change Addition  NAME  STREET ADDRESS  6.3 STREET ADDRESS   | Į.   |  |  | 5.4 CITY-                      | ST-ZIP           |  |                    |                    | -                                       |
| NAME  62 NAME  63. STREET ADDRESS  63. STREET ADDRESS  |  | <del></del>  | DELETE   | 6.1 TITLE                      |                  |  | <del></del>        | Change             | Addition                                |
| STREET ADDRESS 6.3 STREET ADDRESS  | 1  |  |  | 6.2 NAME                       | }                |  |                    |                    | 1                                       |
| 0.4 0174 07 710  |  |  |  | 6.3 STREI                      | TADDRESS         | •  |                    |                    |   |
|  | CITY-ST-ZIP  |  |  | 6.4 CITY-                      | ST-ZIP           |  |                    |                    |   |

14. 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 annual report or supplemental annual 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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE**