	ILE NOW: FIL PROFIT RPORATION	ING FEE AFT	FLORIDA DEP			Anr		ILE 1991		00a <sup>.</sup>
	UAL REPORT 1997		Secre	Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		Apr 29 1997 8:00a Secretary of State				
ALLIGAT	MENT # P	NC.	Auling Address	)						
n david A. Ja 1064 Howell Minter Park	BRANCH ROAD	10	DAVID A. JOHNSON 364 HOWELL BRANCH 1INTER PARK FL 32789			3. Date Incorporated o	r Qualified	3a. Da	ite of Last F	leport
2 Principal I	Place of Business		Mailing Address			11/25/1992 4. FEI Number		09/0	04/1996	
1]	-lace of Dusiness	26	a maining Address			<b>59-3190523</b>				oplied For of Applicabl
Sulte, Apt.	. <b>#, et</b> c.	27	Suite, Apt. #, etc,			5. Certificate of Status	Desired		•	Additional equired
City & Stat	te	28	City & State		·	6. Election Campaign F	•		\$5.00	May Be
Zip	Coun	try r ~ 1	Zip	Count	ry	Trust Fund Contribut     B. This corporation has	liability for i	intangible	tax under s	to Fees . 199.032,
U	25 9. Name and Addr	29 Pess of Current Regis	stered Agent	30		Florida Statutes 10. Name and Address		_] Yes [ gistered /		
	INSON, DAVID A			8	1 Name					
100		I ROAD		8	2 Street Ade	Iress (P.O. Box Number is N	ot Acceptat	ole)		
	4 HÖWELL BRANCH									
	TER PARK FL 3278			8:						
	iter park fl 32789	9	307.1508, Florida Stat	64	3 4 City			FL Durpose of		Code Is registere
WIN 11. Pursuant office or i agent. La	iter park fl 32789	ctions 607.0502 and 6 th, in the State of Flori copt the obligations o		B4 tutes, the abor is authorized t Florida Statute	City     City     Contract correct     Correct	poration submits this statem tion's board of directors. I he		FL purpose of pot the appo		
WIN 11. Pursuant office or i agent. I a SIGNATURE 12.	to the provisions of Seregistered agent, or bo am familiar with, and ac Signalure, typed or printed nar	ctions 607.0502 and 6 th, in the State of Flori copt the obligations o	e rapplicable (N CTORS	B4 tutes, the abor is authorized t Florida Statute 1011 Registered A 13.	City     City     Corporation     Corporation     Sector a gnature request.	poration submits this statem ation's board of directors. I he	ent for the p ereby accep	DUrpose of of the appe	changing i ointment as DIRECTOF	is registere registered
VIN 11. Pursuant office or agent. 1 a SIGNATURE 12. ITTLE IAME STREET ADDRESS	to the provisions of Ser registered agent, or bo am familiar with, and ac Signature, typed or printed nar ( PVST JOHNSON, DAVID 1064 HOWELL BR	Ctions 607.0502 and E th, in the State of Flori copt the obligations o me of registered agent and the OFFICERS AND DIRE A ANCH ROAD	viřapplicable (N	B4 tutes, the abover is authorized to Florida Statute 1011 Registered As 13. 1.1 TILE 1.2 NAME 1.3 STREE	City     City     City     ve-named cor     by the corpora     s.     cord sgnature req.     cord sgnature req.     cord sgnature req.     cord sgnature req.	poration submits this statem ation's board of directors. The	ent for the p ereby accep	DUrpose of of the appe	changing in ointment as	is registered registered
WIN 11. Pursuant office or agent. 1 a SIGNATURE III.E III.E IAME STREET ADDRESS SITY-ST-ZIP III.E	to the provisions of Ser registered agent, or bo am familiar with, and ac Signature, typed or printed nar ( PVST JOHNSON, DAVID	Ctions 607.0502 and E th, in the State of Flori copt the obligations o me of registered agent and this OFFICERS AND DIRE A ANCH ROAD	e rapplicable (N CTORS	B4 tutes, the abover is authorized to Florida Statute 1011 Registered A 13. 1.1 TILE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TILE	City     Ve-named cor     yy the corpora     s.     gent signature req.     I ADDRESS     ST-ZIP	poration submits this statem ation's board of directors. The	ent for the p ereby accep	DUrpose of of the appe	changing i ointment as DIRECTOF	is registered registered IS IN 12
WIN 11. Pursuant office or i agent. 1 a SIGNATURE 12. ITTLE VAME STREET ADDRESS DITY-ST-ZIP ITTLE MME	to the provisions of Ser registered agent, or bo am familiar with, and ac Signature, typed or printed nar ( PVST JOHNSON, DAVID 1064 HOWELL BR	Ctions 607.0502 and E th, in the State of Flori copt the obligations o me of registered agent and this OFFICERS AND DIRE A ANCH ROAD	CTORS	B4 tutes, the above is authorized to Florida Statute 1011 Registered A4 13. 1.1 TILE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TILE 2.2 NAME	City     Ve-named cor     yy the corpora     s.     gent signature req.     I ADDRESS     ST-ZIP	poration submits this statem ation's board of directors. The	ent for the p ereby accep	DUrpose of of the appe	changing i ointment as DIRECTOF Change	is registered registered IS IN 12
WIN 11. Pursuant office or is agent. 1 a SIGNATURE 12. ITILE VAME STREET ADDRESS CITY-ST-ZIP ITILE ITIL	to the provisions of Ser registered agent, or bo am familiar with, and ac Signature, typed or printed nar ( PVST JOHNSON, DAVID 1064 HOWELL BR	Ctions 607.0502 and E th, in the State of Flori copt the obligations o me of registered agent and this OFFICERS AND DIRE A ANCH ROAD	CTORS	Ba tutes, the abov Florida Statute IOTE Registered A 13. 1.1 TILE 1.2 NAME 1.3 STREE 1.4 CITY 2.1 TILE 2.2 NAME 2.3 STREE 2.4 CITY	City     Ve-named cor     yy the corpora     s.     analyse     analyse     analyse     tadDRESS     ST-ZIP	poration submits this statem ation's board of directors. The	ent for the p ereby accep	DUTPOSE OF DOT THE ADDO DATE DERS AND	changing i ointment as DIRECTOF Change	IS registered registered IS IN 12
WIN 11. Pursuant office or a agent. 1 e SIGNATURE 12. IITLE VAME STREET ADDRESS CITY-ST-ZIP IITLE STREET ADDRESS CITY-ST-ZIP IITLE	to the provisions of Ser registered agent, or bo am familiar with, and ac Signature, typed or printed nar ( PVST JOHNSON, DAVID 1064 HOWELL BR	Ctions 607.0502 and E th, in the State of Flori copt the obligations o me of registered agent and this OFFICERS AND DIRE A ANCH ROAD	CTORS	Ba tutes, the abor Florida Statute IOTE Recistered A 13. 1.1 TILE 1.2 NAME 1.3 STREE 1.4 CITY 2.1 TILE 2.2 NAME 2.3 STREE	City     Ve-named cor     yy the corpora es.     analytic corpora es.     the corporation es.     the corpora	poration submits this statem ation's board of directors. The	ent for the p ereby accep	DUTPOSE OF DOT THE ADDO DATE DERS AND	changing i ointment as DIRECTOF Change	IS registered registered IS IN 12
WIN 11. Pursuant office or agont.1 a SIGNATURE 12. ITLE ITL	to the provisions of Ser registered agent, or bo am familiar with, and ac Signature, typed or printed nar ( PVST JOHNSON, DAVID 1064 HOWELL BR	Ctions 607.0502 and E th, in the State of Flori copt the obligations o me of registered agent and this OFFICERS AND DIRE A ANCH ROAD	CTORS	B4 tutes, the abor is authorized to Floricla Statute 101F Registered A4 13. 1.1 TILE 1.2 NAME 1.3 STREE 1.4 CITY 2.1 TILE 2.2 NAME 2.3 STREE 2.4 CITY 3.1 TILE 3.2 NAME	City     Ve-named cor     yy the corpora es.     analytic corpora es.     the corporation es.     the corpora	poration submits this statem ation's board of directors. The	ent for the p ereby accep	DUTPOSE OF DOT THE ADDO DATE DERS AND	changing i ointment as DIRECTOF Change	IS registered registered IS IN 12
WIN 11. Pursuant office or agont. 1 a SIGNATURE 12. INTLE VAME STREET ADDRESS CITY-ST-ZIP INTLE VAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	to the provisions of Ser registered agent, or bo am familiar with, and ac Signature, typed or printed nar ( PVST JOHNSON, DAVID 1064 HOWELL BR	Ctions 607.0502 and E th, in the State of Flori copt the obligations o me of registered agent and this OFFICERS AND DIRE A ANCH ROAD	CTORS	B4 tutes, the abor is authorized to Floricla Statute 101F Registered A4 13. 1.1 TILE 1.2 NAME 1.3 STREE 1.4 CITY 2.1 TILE 2.2 NAME 2.3 STREE 2.4 CITY 3.1 TILE 3.2 NAME	City     Ve-named cor     yy the corpora     sort signature requ     corpora     sort signature     corpora     corpora	poration submits this statem ation's board of directors. The	ent for the p ereby accep	DATE DATE DATE CERS AND	changing if changing if change DIRECTOF Change Change Change	Is registered registered IS IN 12 Addilio
WIN 11. Pursuant office or i agent. 1 a SIGNATURE 12. ITTLE STREET ADDRESS DITY-ST-ZIP ITTLE ITTL	to the provisions of Ser registered agent, or bo am familiar with, and ac Signature, typed or printed nar ( PVST JOHNSON, DAVID 1064 HOWELL BR	Ctions 607.0502 and E th, in the State of Flori copt the obligations o me of registered agent and this OFFICERS AND DIRE A ANCH ROAD	CTORS	B4 tutes, the abor is authorized to Floricla Statute 101F Registered A4 13. 1.1 TILE 1.2 NAME 1.3 STREE 1.4 CITY 2.1 TILE 2.3 STREE 2.4 CITY 3.1 TILE 3.3 STREE 3.4 CITY	City     Ve-named cor     yy the corpora     s.     cord sgnature req.     cord sgnatu	poration submits this statem ation's board of directors. The	ent for the p ereby accep	DATE DATE DATE CERS AND	changing i ointment as DIRECTOF Change	Is registered registered IS IN 12 Addition Addition
WIN 11. Pursuant office or agont. 1 a SIGNATURE 12. ITILE STREET ADDRESS DITY-ST-ZIP ITILE MME STREET ADDRESS DITY-ST-ZIP ITILE MME STREET ADDRESS DITY-ST-ZIP ITILE MME STREET ADDRESS DITY-ST-ZIP ITILE STREET ADDRESS DITY-ST-ZIP ITILE STREET ADDRESS DITY-ST-ZIP	to the provisions of Ser registered agent, or bo am familiar with, and ac Signature, typed or printed nar ( PVST JOHNSON, DAVID 1064 HOWELL BR	Ctions 607.0502 and E th, in the State of Flori copt the obligations o me of registered agent and this OFFICERS AND DIRE A ANCH ROAD	CTORS	B4 Tutes, the above Floricla Statute Floricla Statute 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY 4.1 TITLE 4.2 NAME 4.3 STREE	City     Ve-named cor     py the corpora     ss.     article gnature req.     corpora     ss.     corpora     ss.     corpora     ss.     corpora     cor     cor     corpora     corpora     corpora     cor     corpora	poration submits this statem ation's board of directors. The	ent for the p ereby accep	DATE DATE DATE CERS AND	changing if changing if change DIRECTOF Change Change Change	Is registered registered IS IN 12 Addilio
WIN 11. Pursuant office or agent. 1 a SIGNATURE IZ. ITLE IAME STREET ADDRESS SITY-ST-ZIP ITLE IAME ITREET ADDRESS SITY-ST-ZIP ITLE	to the provisions of Ser registered agent, or bo am familiar with, and ac Signature, typed or printed nar ( PVST JOHNSON, DAVID 1064 HOWELL BR	Ctions 607.0502 and E th, in the State of Flori copt the obligations o me of registered agent and this OFFICERS AND DIRE A ANCH ROAD	CTORS	B4 Tutes, the above Florida Statute Florida Statute 13. 1.1 TILE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TILE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TILE 3.2 NAME 3.4 CITY- 4.1 TILE 4. 2 NAME	City     Ve-named cor     py the corpora     ss.     article gnature req.     corpora     ss.     corpora     ss.     corpora     ss.     corpora     cor     cor     corpora     corpora     corpora     cor     corpora	poration submits this statem ation's board of directors. The	ent for the p ereby accep	DATE DATE DATE CERS AND	changing if changing if change DIRECTOF Change Change Change	IS registered registered IS IN 12 Addition Addition
WIN 11. Pursuant office or agent. 1 a SIGNATURE 12. ITILE STREET ADDRESS DITY-ST-ZIP ITILE STREET ADDRESS DITY-ST-ZIP ITILE STREET ADDRESS DITY-ST-ZIP ITILE IAME STREET ADDRESS DITY-ST-ZIP ITILE IAME	to the provisions of Ser registered agent, or bo am familiar with, and ac Signature, typed or printed nar ( PVST JOHNSON, DAVID 1064 HOWELL BR	Ctions 607.0502 and E th, in the State of Flori copt the obligations o me of registered agent and this OFFICERS AND DIRE A ANCH ROAD	CTORS DELETE DELETE DELETE DELETE DELETE	B4 Tutes, the above Floricla Statute Floricla Statute 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 3.3 STREE 3.4 CITY- 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY- 5.1 TITLE 5.2 NAME	City     Ve-named cor     yy the corpora     s.     errl sgnature req.     in ADDRESS     ST- ZIP     in ADDRESS     -S1 - ZIP     in ADDRESS     -S1 - ZIP     in ADDRESS     S1 - ZIP	poration submits this statem ation's board of directors. The	ent for the p ereby accep	DATE DATE DATE CERS AND	changing if changing if change DIRECTOF Change Change Change Change	s registere registered
WIN 11. Pureuant office or agent. 1 a SIGNATURE 12. ITILE STREET ADDRESS DTY-ST-ZIP ITILE MME STREET ADDRESS DTY-ST-ZIP ITLE AME STREET ADDRESS DTY-ST-ZIP ITLE AME STREET ADDRESS DTY-ST-ZIP ITLE AME STREET ADDRESS	to the provisions of Ser registered agent, or bo am familiar with, and ac Signature, typed or printed nar ( PVST JOHNSON, DAVID 1064 HOWELL BR	Ctions 607.0502 and E th, in the State of Flori copt the obligations o me of registered agent and this OFFICERS AND DIRE A ANCH ROAD	Papylicable (N CTORS     DELETE     DELETE     DELETE     DELETE     DELETE     DELETE     DELETE	B4 Tutes, the above Floricla Statute Floricla Statute 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 3.3 STREE 3.4 CITY- 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY- 5.1 TITLE 5.2 NAME	City     Ve-named cor     yy the corpora     s.     gert signature req.     end to corpora     s.     f.     ADDRESS     ST - ZIP     E     T ADDRESS     ST - ZIP	poration submits this statem ation's board of directors. The	ent for the p ereby accep	DATE DATE DATE CERS AND	changing if changing if change DIRECTOF Change Change Change Change	IS registered registered IS IN 12 Addition Addition Addition
WIN 11. Pursuant office or agent. 1 a SIGNATURE 12. ITILE STREET ADDRESS CITY-ST-ZIP ITILE VAME STREET ADDRESS CITY-ST-ZIP ITILE VAME STREET ADDRESS CITY-ST-ZIP ITILE VAME STREET ADDRESS CITY-ST-ZIP ITILE VAME STREET ADDRESS CITY-ST-ZIP ITILE VAME STREET ADDRESS CITY-ST-ZIP ITILE VAME	to the provisions of Ser registered agent, or bo am familiar with, and ac Signature, typed or printed nar ( PVST JOHNSON, DAVID 1064 HOWELL BR	Ctions 607.0502 and E th, in the State of Flori copt the obligations o me of registered agent and this OFFICERS AND DIRE A ANCH ROAD	CTORS DELETE DELETE DELETE DELETE DELETE	B4 Tutes, the above Floricla Statute Floricla Statute 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 3.3 STREE 3.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY- 6.1 TITLE	3     City       vc-named corporation     corporation       gert signature requires     corporation <td>poration submits this statem ation's board of directors. The</td> <td>ent for the p ereby accep</td> <td>DATE DATE DATE DERS AND</td> <td>changing if changing if change DIRECTOF Change Change Change Change</td> <td>IS registered registered IS IN 12 Addition Addition Addition</td>	poration submits this statem ation's board of directors. The	ent for the p ereby accep	DATE DATE DATE DERS AND	changing if changing if change DIRECTOF Change Change Change Change	IS registered registered IS IN 12 Addition Addition Addition
WIN 11. Pureuant office or agent. 1 a SIGNATURE 12. ITILE STREET ADDRESS OTY-ST-ZIP ITILE STREET ADDRESS OTY-ST-ZIP ITLE	to the provisions of Ser registered agent, or bo am familiar with, and ac Signature, typed or printed nar ( PVST JOHNSON, DAVID 1064 HOWELL BR	Ctions 607.0502 and E th, in the State of Flori copt the obligations o me of registered agent and this OFFICERS AND DIRE A ANCH ROAD	Papylicable (N CTORS     DELETE     DELETE     DELETE     DELETE     DELETE     DELETE     DELETE	B4 Tutes, the above Floricla Statute Floricla Statute 13. 1.1 TILLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 3.3 STREE 3.4 CITY- 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY- 6.1 TITLE 6.2 NAME	3     City       vc-named corporation     25.       gert signature required     25.       gert signature required     25.       1 ADDRESS     51.       51.     21P	poration submits this statem ation's board of directors. The	ent for the p ereby accep	DATE DATE DATE DERS AND	changing it changing it change DIRECTOF Change Change Change Change Change Change	Is registered registered IS IN 12 Addition Addition Addition