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

PROFIT CORPORATION - ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # **P93000027295**1. Corporation Name

ALDRICH RUG INTERIORS, INC.

FILED Jan 21, 1999 8:00am Secretary of State 01-21-1999 90065 025 ***150.00

The state of the s								
Orinainal Olas	an of Business	Mailing Address					u sii 40 14 0 11011 10010 110	B IBIBI BIII IBBI
	ce of Business	5						
718-23RD AVE BRADENTON F		718 23RD AVE. W. Bradenton FL 3420:	5			DO NOT WRITE	IN THIS SBACE	
	,					DO NOT WRITE I 3. Date Incorporated or Qualifed .	IN THIS SPACE	
-						,		1
2 Principal D	Place of Business	2a. Mailing Address				04/12/1993 4. FEI Number		pplied For
	lace of Business	⊢ , `					├	
Suite, Apt.	#`etc	26 Suite, Apt. #, etc.				65-0389831		ot Applicable Additional
`	. #, 6 10.					5. Certifcate of Status Desired	1	equired
City & Stat	to	City & State				A Flatin Committee Financia		
23	, .	28 .				6. Election Campaign Financing Trust Fund Contribution	1	May Be to Fees
Zip	Country	Zip	Cou	ıntry		This corporation owes the current		10 1 003
24	25	29	30	y		Personal Property Tax.	year intangible ☐ Yes	⊠No
24	9. Name and Address of Curre		30	1		10. Name and Address of New Regi		
				81	Name	to. Hame and Hadrone or How Hog.		
PAU	ILSEN. JEANNE	and the state of t		Ш				
718	23RD AVE. W.			82	Street Add	ress (P.O. Box Number is Not Acceptable) 	
BRA	DENTON FL 34205			83		· 100 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		102 711 62
		:		84	City	1 1981 1 22 4 4 5 5 5 3 4 5 7 5 4 4 4 4 5 2 5 5 5 6 5 6 6 6 6 6 6 6 6 6 6 6 6 6	85 Ziń	Code
				• •	Oity		FL "	
							4	
11. Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Florida S	tatutes, the a	bove	-named corp	poration submits this statement for the pur	pose of changing it	s registered
office or r	registered agent, or both, in the State	of Florida. Such change w	as authorized	d by t	the corporati	poration submits this statement for the pur ion's board of directors. I hereby accept th	pose of changing it e appointment as r	egistered
office or r agent. I a	registered agent, or both, in the State am familiar with, and accept the obliga	of Florida. Such change w	as authorized	d by t	the corporati	poration submits this statement for the pur on's board of directors. I hereby accept th	pose of changing its e appointment as r	egistered
office or r	registered agent, or both, in the State am familiar with, and accept the obliga	of Florida. Such change wattons of, Section 607.0505	as authorize , Florida Stat	d by t tutes.	the corporati	ion's board of directors. I hereby accept th	pose of changing it e appointment as r	egistered
office or r agent. I a	registered agent, or both, in the State am familiar with, and accept the obliga . Signature, typed or printed name of registered age	of Florida. Such change wattons of, Section 607.0505	as authorize , Florida Stat	d by t tutes.	the corporati	ion's board of directors. I hereby accept th	e appointment as r	egistered
öffice or r agent. I a SIGNATURE	registered agent, or both, in the State am familiar with, and accept the obliga . Signature, typed or printed name of registered age	e of Florida. Such change wations of, Section 607.0505	as authorized, Florida Stat NOTE: Registered 13.	d by toutes.	the corporati	ed when reinstating) + 1/2 (2) ADDITIONS/CHANGES TO OFFICE	e appointment as r	egistered
office or ragent. I a SIGNATURE 12.	registered agent, or both, in the State am familiar with, and accept the obliga . Signature, typed or printed name of registered age OFFICERS AN	e of Florida. Such change wations of, Section 607.0505 ant and title if applicable. (ND DIRECTORS	as authorized, Florida Stat	d by toutes.	the corporati	on's board of directors. I hereby accept the	e appointment as n DATE ERS AND DIRECT	ORS IN 12
SIGNATURE 12.	registered agent, or both, in the State am familiar with, and accept the obligation. Signature, typed or printed name of registered age OFFICERS AND PALDRICH, MARK	e of Florida. Such change wations of, Section 607.0505 ant and title if applicable. (ND DIRECTORS	as authorized, Florida State NOTE: Registered 13. E 1.1 TI 1.2 N.	d by to tutes. Agent TLE AME	the corporati	ed when reinstating) + 1/2 (2) ADDITIONS/CHANGES TO OFFICE	e appointment as n DATE ERS AND DIRECT	ORS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS	registered agent, or both, in the State am familiar with, and accept the obligation. Signature, typed or printed name of registered age OFFICERS APPLANTICH, MARK 718 23RD AVE. W.	e of Florida. Such change wations of, Section 607.0505 ant and title if applicable. (ND DIRECTORS	as authorized, Florida State NOTE: Registered 13. E 1.1 TI 1.2 N. 1.3 S'	d by to tutes. Agent TLE AME	the corporati	ed when reinstating) + 1/2 (2) ADDITIONS/CHANGES TO OFFICE	e appointment as n DATE ERS AND DIRECT	ORS IN 12
SIGNATURE 12. TITLE NAME	registered agent, or both, in the State am familiar with, and accept the obligation Signature, typed or printed name of registered age OFFICERS AT P ALDRICH, MARK	e of Florida. Such change wations of, Section 607.0505 ant and title if applicable. (ND DIRECTORS	as authorized, Florida Stat NOTE: Registerec 13. E 1.1 Ti 1.2 N 1.3 S' 1.4 Ci	Agent TLE AME TREET	t signature require	ed when reinstating) + 1/2 (2) ADDITIONS/CHANGES TO OFFICE	e appointment as n DATE ERS AND DIRECT	ORS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	registered agent, or both, in the State am familiar with, and accept the obligation of FICERS AND PALDRICH, MARK 718 23RD AVE. W. BRADENTON FL 34205	e of Florida. Such change wations of, Section 607.0505 ant and title if applicable. (ND DIRECTORS	as authorized, Florida Stat NOTE: Registered 13. E 1.1.TI 1.2.N 1.3.S' 1.4.C	d by to	t signature require	ed when reinstating) + 1/2 (2) ADDITIONS/CHANGES TO OFFICE	e appointment as r DATE ERS AND DIRECT	ORS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	registered agent, or both, in the State am familiar with, and accept the obligation of FICERS AND PALDRICH, MARK 718 23RD AVE. W. BRADENTON FL 34205 VP ANSBRO, DAVID K	e of Florida. Such change wations of, Section 607.0505 ant and title if applicable. (ND DIRECTORS	as authorizer, Florida Stat NOTE: Registerec 13. E 1.1 T1 1.2 N. 1.3 S' 1.4 CI 2.2 N.	ITLE AME TY-ST- TLE AME	t signature require	ed when reinstating) + 1/2 (2) ADDITIONS/CHANGES TO OFFICE	e appointment as r DATE ERS AND DIRECT	ORS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	registered agent, or both, in the State am familiar with, and accept the obligation of FICERS AND PALDRICH, MARK 718 23RD AVE. W. BRADENTON FL 34205 VP ANSBRO, DAVID K 718 23RD AVE. W. 718 23RD AVE. W.	e of Florida. Such change wations of, Section 607.0505 ant and title if applicable. (ND DIRECTORS	as authorizer, Florida Stat NOTE: Registerec 1.1 TI 1.2 N 1.3 S 1.4 Cl 2.1 TI 2.2 N 2.3 S	TLE AME TREET, TLE AME	ADDRESS ADDRESS	ed when reinstating) + 1/2 (2) ADDITIONS/CHANGES TO OFFICE	e appointment as r DATE ERS AND DIRECT	ORS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	registered agent, or both, in the State am familiar with, and accept the obligation of FICERS AND PALDRICH, MARK 718 23RD AVE. W. BRADENTON FL 34205 VP ANSBRO, DAVID K	e of Florida. Such change wations of, Section 607.0505 ant and title if applicable. (ND DIRECTORS	as authorizer, Florida Stat NOTE: Registerec 13. E 1.1 Ti 1.2 N. 1.3 S' 1.4 C E 2.1 Ti 2.2 N. 2.3 S' 2.4 C	I Agent AME TREET TLE AME TREET TLE TREET	ADDRESS ADDRESS	ed when reinstating) + 1/2 (2) ADDITIONS/CHANGES TO OFFICE	e appointment as r DATE ERS AND DIRECT	ORS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY- ST-ZIP TITLE NAME STREET ADDRESS CITY- ST-ZIP TITLE	registered agent, or both, in the State am familiar with, and accept the obligation of the state of registered age of the obligation of the state of registered age of the state of the state of registered age of the state of th	e of Florida. Such change wations of, Section 607.0505 ant and title if applicable. (ND DIRECTORS DELETI	as authorizer, Florida Stat NOTE: Registerec 13. 1.1.Tl 1.2.N. 1.3.S' 1.4.Cl 2.1.Tl 22.N. 2.3.S' 2.4.Cl	Agent Agent TLE AME TREET, TLE AME TREET, TLE TREET, TLE TREET, TLE TREET,	ADDRESS ADDRESS	ed when reinstating) + 1/2 (2) ADDITIONS/CHANGES TO OFFICE	e appointment as n DATE ERS AND DIRECT Change	DRS IN 12 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	registered agent, or both, in the State am familiar with, and accept the obligation of the obligation	e of Florida. Such change wations of, Section 607.0505 ant and title if applicable. (ND DIRECTORS DELETI	as authorizer, Florida Stat NOTE: Registerec 1.1 Ti 1.2 N 1.3 S 1.4 C 2.1 Ti 2.2 N 2.3 S 2.4 C E 3.1 Ti 3.2 N	d by t d agent	ADDRESS -ZIP ADDRESSZIP	ed when reinstating) + 10/2002 ADDITIONS/CHANGES TO OFFICE	e appointment as n DATE ERS AND DIRECT Change	DRS IN 12 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	registered agent, or both, in the State am familiar with, and accept the obligation of the state of registered age of the obligation of the state of registered age of the state of the state of registered age of the state of th	e of Florida. Such change wations of, Section 607.0505 ant and title if applicable. (ND DIRECTORS DELETI	as authorizer, Florida Stat NOTE: Registered 13. E 1.1Ti 12.N 1.3 S' 1.4 Ci 22.N 2.3 S' 2.4 Ci E 3.1 Ti 3.2 N 3.3 S'	ITLE AME TREET, TREET, TILE TREET, TREET, TILE TREET, TILE TREET,	ADDRESS - ZIP ADDRESS - ADDRESS - ADDRESS	ed when reinstating) + 10/2002 ADDITIONS/CHANGES TO OFFICE	e appointment as n DATE ERS AND DIRECT Change	DRS IN 12 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	registered agent, or both, in the State am familiar with, and accept the obligation of the obligation	e of Florida. Such change wations of, Section 607.0505 ant and title if applicable. (ND DIRECTORS DELETI	as authorizer, Florida Stat NOTE: Registerec 1.1 Ti 1.2 N 1.3 S 1.4 C 2.1 Ti 2.2 N 2.3 S 2.4 C 3.1 Ti 3.2 N 3.3 S 3.4 C	d by t d agent	ADDRESS - ZIP ADDRESS - ADDRESS - ADDRESS	on's board of directors. I hereby accept the ed when reinstating) ** ADDITIONS/CHANGES TO OFFICE ADDITIONS/CHANGES TO OFFICE **TO OFFICE TO OFF	e appointment as n DATE ERS AND DIRECT Change	DRS IN 12 Addition Addition
Office or agent. I a signature 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	registered agent, or both, in the State am familiar with, and accept the obligation of the obligation	e of Florida. Such change wations of, Section 607.0505 ant and title if applicable. (ND DIRECTORS DELETI DELETI	as authorizer, Florida Stat NOTE: Registerec 13. E 1.1Ti 12.N 1.3.S' 1.4.Cl 22.N 23.S' 2.4.Cl E 3.1Ti 32.N 33.S' 34.Cl E 4.1Ti	d by t utes. d Agent TLE AME TITE TLE TITE TLE TITE TITE TITE TITE	ADDRESS - ZIP ADDRESS - ADDRESS - ADDRESS	on's board of directors. I hereby accept the ed when reinstating) ** ADDITIONS/CHANGES TO OFFICE ADDITIONS/CHANGES TO OFFICE **TO OFFICE TO OFF	e appointment as n DATE ERS AND DIRECT Change Change	DRS IN 12 Addition Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME NAME NAME NAME NAME NA	registered agent, or both, in the State am familiar with, and accept the obligation of the state am familiar with, and accept the obligation of the state of the	e of Florida. Such change wations of, Section 607.0505 ant and title if applicable. (ND DIRECTORS DELETI DELETI DELETI	as authorizer, Florida Stat NOTE: Registerec 13. E 1.1Ti 12.N 1.3.S' 1.4.Cl 22.N 23.S' 2.4.Cl E 3.1Ti 32.N 33.S' 34.Cl E 4.1Ti 4.2.N	d by t d Agent	ADDRESS - ZIP ADDRESS - ZIP ADDRESS - ZIP	on's board of directors. I hereby accept the ed when reinstating) ** ADDITIONS/CHANGES TO OFFICE ADDITIONS/CHANGES TO OFFICE **TO OFFICE TO OFF	e appointment as n DATE ERS AND DIRECT Change Change	DRS IN 12 Addition Addition
Office or agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	registered agent, or both, in the State am familiar with, and accept the obligation of the state am familiar with, and accept the obligation of the state of the	e of Florida. Such change wations of, Section 607.0505 ant and title if applicable. (ND DIRECTORS DELETI DELETI	as authorizer, Florida Stat NOTE: Registerec 13. E 1.1 Ti 12 N. 1.3 S' 1.4 C E 2.1 Ti 22 N. 2.3 S' 2.4 C E 3.1 Ti 32 N. 3.3 S' 3.4 C E 4.1 Ti 4.2 N. 4.3 S'	d by t d Agent TILE AME TREET, AME	ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS ADDRESS	on's board of directors. I hereby accept the ed when reinstating) ** ADDITIONS/CHANGES TO OFFICE ADDITIONS/CHANGES TO OFFICE **TO OFFICE TO OFF	e appointment as n DATE ERS AND DIRECT Change Change	DRS IN 12 Addition Addition
Office or agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	registered agent, or both, in the State am familiar with, and accept the obligation of the state am familiar with, and accept the obligation of the state of the	e of Florida. Such change wations of, Section 607.0505 ant and title if applicable. (ND DIRECTORS DELETI DELETI	as authorizer, Florida Stat NOTE: Registerec 1.1 Ti 1.2 N 1.3 S 1.4 C 2.1 Ti 2.2 N 2.3 S 2.4 C E 3.1 Ti 3.2 N 3.3 S 3.4 C E 4.1 Ti 4.2 N 4.3 S 4.4 CI	d by t d Agent	ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS ADDRESS	on's board of directors. I hereby accept the ed when reinstating) ** ADDITIONS/CHANGES TO OFFICE ADDITIONS/CHANGES TO OFFICE **TO OFFICE TO OFF	e appointment as n DATE ERS AND DIRECT Change Change	DRS IN 12 Addition Addition Addition
Office or agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	registered agent, or both, in the State am familiar with, and accept the obligation of the state am familiar with, and accept the obligation of the state of the	e of Florida. Such change wations of, Section 607.0505 ant and title if applicable. (ND DIRECTORS DELETI DELETI DELETI	as authorizer, Florida Stat NOTE: Registerec, Florida Stat 13. E 1.1Ti 12.N 1.3.S' 1.4.Cl 22.N 23.S' 2.4.Cl E 3.1Ti 32.N 33.S' 34.Cl E 4.1Ti 4.2.N 4.3.S' 4.4.Cl	d by t d Agent	ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS ADDRESS	on's board of directors. I hereby accept the ed when reinstating) ** ADDITIONS/CHANGES TO OFFICE ADDITIONS/CHANGES TO OFFICE **TO OFFICE TO OFF	e appointment as n DATE ERS AND DIRECT Change Change	DRS IN 12 Addition Addition
Office or agent. I a signature 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME NAME NAME	registered agent, or both, in the State am familiar with, and accept the obligation of the state of registered age of the obligation of the state of registered age of the state of the sta	e of Florida. Such change wations of, Section 607.0505 ant and title if applicable. (ND DIRECTORS DELETI DELETI	as authorizer, Florida Stat NOTE: Registerec 13. E 1.1Ti 12.N 1.3.S' 1.4.Cl 22.N 23.S' 2.4.Cl E 3.1Ti 32.N 33.S' 34.Cl E 4.1Ti 4.2.N 4.3.S' 4.4.Cl	d by t d Agent	ADDRESS - ZIP ADDRESS - ZIP ADDRESS - ZIP	on's board of directors. I hereby accept the ed when reinstating) ** ADDITIONS/CHANGES TO OFFICE ADDITIONS/CHANGES TO OFFICE **TO OFFICE TO OFF	e appointment as n DATE ERS AND DIRECT Change Change	DRS IN 12 Addition Addition Addition
Office or agent. I a signature 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	registered agent, or both, in the State am familiar with, and accept the obligation of federated age OFFICERS AND OFFICERS AND AVE. W. BRADENTON FL 34205 VP ANSBRO, DAVID K 718 23RD AVE. W. BRADENTON FL	e of Florida. Such change wations of, Section 607.0505 ant and title if applicable. (ND DIRECTORS DELETI DELETI	as authorizer, Florida Stat NOTE: Registerec 13. E 1.1T 1.2 N. 1.3 S' 1.4 C E 2.1 T 2.2 N. 2.3 S' 2.4 C E 3.1 T 4.2 N. 4.3 S' 4.4 CI E 5.1 π 5.2 N. 5.3 S'	ITLE AME TREET TLE AME TREET TLE TREET	ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS ADDRESS ADDRESS ADDRESS	on's board of directors. I hereby accept the ed when reinstating) ADDITIONS/CHANGES TO OFFICE	e appointment as n DATE ERS AND DIRECT Change Change	DRS IN 12 Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	registered agent, or both, in the State am familiar with, and accept the obligation of frequency of the obligation of the state of the obligation of the obl	e of Florida. Such change wations of, Section 607.0505 ant and title if applicable. (ND DIRECTORS DELETI DELETI	as authorizer, Florida Stat NOTE: Registerec 13. E 1.1Ti 12.N 1.3.S' 1.4.Cl 22.N 23.S' 2.4.Cl E 3.1Ti 32.N 33.S' 34.Cl E 4.1Ti 4.2.N 43.S' 44.Cl E 5.1Ti 52.N 53.S' 54.Cl	d by t d Agent	ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS ADDRESS ADDRESS ADDRESS	on's board of directors. I hereby accept the ed when reinstating) ** ADDITIONS/CHANGES TO OFFICE ADDITIONS/CHANGES TO OFFICE **TO OFFICE TO OFF	e appointment as n DATE ERS AND DIRECT Change Change	DRS IN 12 Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	registered agent, or both, in the State am familiar with, and accept the obligation of the state of registered age of the obligation of the state of registered age of the state of the state of registered age of the state of th	e of Florida. Such change wations of, Section 607.0505 ant and title if applicable. (ND DIRECTORS DELETI DELETI	as authorizer, Florida Stat NOTE: Registered 13. E 1.1T 1.2 N. 1.3 S' 1.4 C E 2.1 T 2.2 N. 2.3 S' 2.4 C E 3.1 T 3.2 N. 3.3 S' 4.4 CI E 5.1 TI 5.2 N. 5.3 S' 5.4 CI E 6.1 TI	ITLE AME TREET TLE TREET TLE TREET TLE TREET TLE TTY-ST TLE TREET TLE TTY-ST TLE TREET TLE TREET TLE TREET TLE TREET TLE TREET TTY-ST TLE	ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS ADDRESS ADDRESS ADDRESS	on's board of directors. I hereby accept the ed when reinstating) ADDITIONS/CHANGES TO OFFICE	e appointment as n DATE ERS AND DIRECT Change Change	DRS IN 12 Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	registered agent, or both, in the State am familiar with, and accept the obligation of the state of registered age of the obligation of the state of registered age of the state of the state of registered age of the state of th	e of Florida. Such change wations of, Section 607.0505 ant and title if applicable. (ND DIRECTORS DELETI DELETI	as authorizer, Florida Stat NOTE: Registerec 13. E 1.1T 1.2 N. 1.3 S 1.4 C E 2.1 T 2.2 N. 2.3 S 2.4 C E 4.1 T 4.2 N. 4.3 S 4.4 C E 5.1 T 5.2 N. 5.3 S 5.4 C E 6.1 T 6.2 N.	ITLE AME TREET TLE AME TREET TLE AME TREET TLE TREET TLE AME TREET TLE TREET TRE	ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 2-ZIP	on's board of directors. I hereby accept the ed when reinstating) ADDITIONS/CHANGES TO OFFICE	e appointment as n DATE ERS AND DIRECT Change Change	DRS IN 12 Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	registered agent, or both, in the State am familiar with, and accept the obligation of the state of registered age of the obligation of the state of registered age of the state of the state of registered age of the state of th	e of Florida. Such change wations of, Section 607.0505 ant and title if applicable. (ND DIRECTORS DELETI DELETI	as authorizer, Florida Stat NOTE: Registerec 13. E 1.1T 1.2 N. 1.3 S' 1.4 CI 2.2 N. 2.3 S' 2.4 CI E 3.1 TI 3.2 N. 3.3 S' 4.4 CI 5.1 TI 5.2 N. 5.3 S' 5.4 CI E 6.1 TI 6.2 N. 6.3 S'	ITLE AME TREET TLE AME TREET TLE AME TREET TLE TREET TLE AME TREET TLE TREET TRE	ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP	on's board of directors. I hereby accept the ed when reinstating) ADDITIONS/CHANGES TO OFFICE	e appointment as n DATE ERS AND DIRECT Change Change	DRS IN 12 Addition Addition Addition

not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an appowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE: