Inte         D         Inte         D         Inte           NAME         POWERS, TIMOTHY J         12 NAME         12 NAME           STREET ADDRESS         270 S. NORTHLAKE BLVD., STE. 1000         13 STREET ADDRESS         I (ITT.ST.2P)           MILE         D         DELETE         21 TITLE         IChange         IA           NAME         POWERS, KEVIN C         23 STREET ADDRESS         ITTLE         IChange         IA           NAME         POWERS, KEVIN C         23 STREET ADDRESS         ITTLE         IChange         IA           NAME         POWERS, KEVIN C         23 STREET ADDRESS         ITTLE         IChange         IA           NAME         POWERS, KEVIN C         23 STREET ADDRESS         ITTLE         IChange         IA           NAME         BULER, ANDREW W         31 STREET ADDRESS         ITTLE         IChange         IA           NAME         MILER, ANDREW W         31 STREET ADDRESS         ITTLE         IChange         IA           ITTLE         Q         OBLETE         31 STREET ADDRESS         ITTLE         IChange         IA           ITTLE         ALTAMONTE SPRINGS FL 32701         34 CTY-ST-ZP         IChange         IA           ITTLE         ALTAMONTE SPRINGS	COR ANNU	PROFIT PORATION JAL REPORT		Katherin Secretary		FILE Apr 29, 199 Secretary 04-29-1999 90001	9 8:00 of Sta	
Principal Prince of Business     Mailing Address       Sto GANKER AK.     20       Store Aker R, 12278     3. Date ii corporation of Cuuriles       US     OUT Maintees       2. Principal Prince of Business     2a. Melling Address       2. Principal Prince of Principal Principa	· · · · · · · · · · · · · · · · · · ·	( Nanao						
2. Principa Place of Business       2a. Maling Address       4. FEI N. mitter       Index.ide / Sei 3000         2. Principa Place of Business       2a. Maling Address       4. FEI N. mitter       Index.ide / Sei 3000         2. Ditte, Ajit .#, etc.       27.       5. Cartific us of Status Desired       For Rex und Contribution         2. Ditte, Ajit .#, etc.       27.       Country       4. FEI N. mitter       Status Desired       For Rex und Contribution         3. Joint Ageing Financing       2a. Joint Ageing Financing       Status Desired       Status Desired       Status Desired       For Rex und Contribution       Address of Current Registered Agent         3. Joint Ageing Address of Current Registered Agent       10. Name and Address of New Registered Agent       10. Name and Address of New Registered Agent       10. Name and Address of New Registered Agent         RUGG, JOE OVIE TAMPA FL 33601       83       25. Struet Address (P.O. Box Number is Not Acceptable)       ELE       85. Zip C xde         SIGNATURE       10. Reserve Address (P.O. Box Number is Not Acceptable)       83       25. Zip C xde       10. Reserve Address (P.O. Box Number is Not Acceptable)         11. Pursuant to the provisions of Scietures 507 MCBD2 and 607.1508. Florids Status Cestment age or comment as registered agent is mitteriated.       10. Name and Address of New Registers d Agent is register and address of Core fit the obligation of Scietures d Scietures for Core fit the obligation of Scietures for Core fith	355 ORANCE / SUITE 5 VINTER PAFK 1	AVE.	270 S. Suite Altam	NORTHLAKE BLVD.	2701	DO NOT WRITE IN TH 3. Date Ir corporated or Qualifed		<b></b>
Sulte, Apt. #, etc.       Sulte, Apt. #, etc.       Sulte, Apt. #, etc.       S. Certificate of Status Desired       \$8.75 Anidiom         City & State       City & State       City & State       Access the current Set Status Desired       \$5.00 rtay Br         31       Zip       Country       Zip       Country       8. This crappetion counts the current year intangible       \$5.00 rtay Br         32       Zip       Country       2       Country       8. This crappetion counts the current year intangible         33       Joint App Br       State       10. Name and Address of Current Registered Agent       10. Name and Address of New Registering d Agent         9. Name and Address of Current Registered Agent       10. Name and Address of New Registering d Agent       10. Name and Address of New Registering d Agent         RUGG, JOE       0HE TAMPA CITY CENTER       82       Struct Ac dress (P.O. Box Number is Not Acceptable)         SIE # 2100       83       40       Different State and Address of New Registering d Agent         11. Pursuant to the provisions of Scictors 607.0502 and 607.1508. Florada Statutes. the above-named criporation submit with statement for the purpose J charging is register agent. Tandard with agentate the agent of the purpose J charging is register agent. Tandard with agentate the agent of the corporation submit with statement for the purpose J charging is register agent. Tandard with agentate the agent of the corporation submit with statement for the purpose J charging is regis	- ·	ace of Business		ailing Address		4. FEI Number		
2       27       City & State       27       Colly & State       28       Free Rectured       Free Rectured         20       28       Colly & State       6. Electon Campaign Financing       Asture Campaign Fin	-	#, etc.		uite, Apt. #, etc.			\$8.75 A	Iditional
3     28     Trust Fund Contribution     Added to Fees       21p     Country     Zp     Country     8. This cryptorition owes the current year intergible Person al Property Tax.     Added to Fees       9. Name and Address of Current Registered Agent     10. Name and Address of New Registered Agent     11. Name and Address of New Registered Agent       RUGG, JOE ONE TAMPA CITY CENTER SIE #2100     82     Street Address (P.O. Box Number is Not Acceptable)       33     33       44     City     FL     83       51     Marine       61     Name and Address of Scitions 607.0502 and 607.1508. Florida Statuses. the above-named corporation submits this statement for the purpose of changing its rigiter office or registered agent, or both, in the state of Florida. Statuses. the apportance Agent agent, and maintair with, and curpt the abits of Scitions 607.0502 and 607.1508. Florida Statuses.     10.       SIGNATURE     D     State of Florida. Statuses.     13.     Addition or contribution       12.     OFFICERS ANI: DIRECTORS     13.     Addition or contribution     DMIT       13.     Addition or contribution or contregistered agent or both, in the state or contribution or contributi		<u> </u>		ity 9 State				
Zip         Country         Zip         Country         End or portation over the current year intampble           9         25         28         30         Persoral Property Tax.         Image: Two persons the current year intampble           9         Name and Address of Current Registered Agent         10. Name and Address of New Registered Agent         10. Name and Address of New Registered Agent           RUGG, JOE         81         Name         82         Street Ac dress (P.O. Box Number is Not Acceptable)           9         TAMPA FL 33601         83         Circuity         FL         85         2/p C vide           11. Pursuant to the provisions of Sc clones 607.0502 and 607.1508. Florida Statutes.         Ba clore         Circuity         FL         85         2/p C vide           12. Correspisered Agent, or bo h, in the State of Florida. Such change was uthorized by the corporation submits this statement for the purpose jointment as registered Agent and crept the oblight and or Colored Statutes.         SIGNATURE         EVENTS         13.         ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS         13.           12. OFFICERS AND DIRECTORS         13.         ADDITIONS/CHANGES TO OFFICERS IND DIRECTORS INCONSIGNATION Statutes.         INTE         D         Change         A           13. Street Address 2         270 S. NORTHLAKE BLVD, STE. 1000         13.STREET Address.         Change         A	- ·	9	<u> </u>	ity & State			•	
9       100	Zip	· · ·		·				
RUGG, JOE       OHE TAMPA CITY CENTER         STE #2100       TAMPA FL 33601         11. Pursuant to the provisione of Scictures 607 0502 and 607 1508. Florida Statutes, the above-named or poration submits this statement for the purpose of changing its register organity and sent the state of Florida. Statutes, the above-named or poration submits this statement for the purpose of changing its register organity and the obligations of, Section 607 0505. Florida Statutes, the above-named or poration submits this statement for the purpose of changing its register organity and the register organity or private raw of regustered approximate approx	<u>.</u>							
Signature. typed or printer as or of ingutaned agent and the if applicable         (NOT : Registrand agent					84 City	F	85 Zip C	ode
TITLE D Change ALTAMONTE SPRINGS FL 32701 1.0 DELETE 1:1 TITLE Change ALTAMONTE SPRINGS FL 32701 1.4 CITY-ST-2/P ALTAMONTE SPRINGS FL 32701 1.4 CITY-ST-2/P TITLE D C Change ALTAMONTE SPRINGS FL 32701 1.4 CITY-ST-2/P Change ALTAMONTE SPRINGS FL 32701 2.4 CITY-ST-2/P ALTAMONTE SPRINGS FL 32701 2.4 CITY-ST-2/P TITLE D C Change ALTAMONTE SPRINGS FL 32701 2.4 CITY-ST-2/P TITLE D C Change ALTAMONTE SPRINGS FL 32701 2.4 CITY-ST-2/P TITLE D C Change ALTAMONTE SPRINGS FL 32701 2.4 CITY-ST-2/P TITLE D C Change ALTAMONTE SPRINGS FL 32701 2.4 CITY-ST-2/P TITLE D C Change ALTAMONTE SPRINGS FL 32701 2.4 CITY-ST-2/P TITLE C D C Change ALTAMONTE SPRINGS FL 32701 1.0 DELETE 3.1 TITLE TITLE ALTAMONTE SPRINGS FL 32701 1.0 DELETE 3.1 TITLE TITLE C C Change ALTAMONTE SPRINGS FL 32701 1.0 DELETE 3.1 TITLE TITLE C C Change ALTAMONTE SPRINGS FL 32701 1.0 DELETE 3.1 TITLE TITLE C C Change ALTAMONTE SPRINGS FL 32701 1.0 DELETE 4.1 TITLE TITLE C C Change ALTAMONTE SPRINGS FL 32701 1.0 DELETE 4.1 TITLE TITLE C C Change ALTAMONTE SPRINGS FL 32701 1.0 DELETE 4.1 TITLE TITLE C C Change ALTAMONTE SPRINGS FL 32701 1.0 DELETE 4.1 TITLE TITLE C C Change ALTAMONTE SPRINGS FL 32701 1.0 DELETE 4.1 TITLE TITLE C C C Change ALTAMONTE SPRINGS FL 32701 1.0 DELETE 4.1 TITLE TITLE C C C C C C C C C C C C C C C C C C C	office cirin agent. Fai	enistered agent or both in t	the State of Florida.	Such change was au	s, the above-named con thorized by the corporat	poration submits this statement for the purpose ion's board of cirectors. I hereby accept the ap	f changing its r	agistered
STREET ADDRE SS       270 S. NORTHLAKE BLVD., STE. 1000       1.3 STREET ADDRESS         ALTAMONTE SPRINGS FL 32701       1.4 CITY-ST-ZP         ITLE       D       DELETE         210 S. NORTHLAKE BLVD., STE. 1000       2.3 STREET ADDRESS         270 S. NORTHLAKE BLVD., STE. 1000       2.4 CITY-ST-ZP         ALTAMONTE SPRINGS FL 32701       2.4 CITY-ST-ZP         ALTAMONTE SPRINGS FL 32701       2.4 CITY-ST-ZP         ALTAMONTE SPRINGS FL 32701       2.4 CITY-ST-ZP         MILLER, ANDREW W       32 NAME         STREET ADDRESS       270 S. NORTHLAKE BLVD., STE. 1000         AJS STREET ADDRESS       270 S. NORTHLAKE BLVD., STE. 1000         ALTAMONTE SPRINGS FL 32701       DELETE         STREET ADDRESS       270 S. NORTHLAKE BLVD., STE. 1000         ALTAMONTE SPRINGS FL 32701       3.4 CITY-ST-ZP         ITTLE       DELETE         STREET ADDRESS       270 S. NORTHLAKE BLVD., STE. 1000         ASTREET ADDRESS       270 S. NORTHLAKE BLVD., STE. 1000         STREET ADDRESS       28 STREET ADDRESS         STY-ST-ZP       4.1 CITY-ST-ZP	office or re agent. + ar SIGNATURE	egistered agent, or both, in t m familiar with, and accept t Signature, typed or printed name of re	the State of Florida. the obligations of, Se agistered agent and title if ap	Such change was au ection 607.0505, Flori plicable (NOT :	s, the above-named ccr thorized by the corporat da Statutes. Registered Agent signature require	ed when reinstaung)	of changing its r contment as reg	əgistered stered
ITLE D Change A Change Change A Change Change A Change Change A Corry-ST-ZIP ALTAMONTE SPRINGS FL 32701 2.4 CITY-ST-ZIP ALTAMONTE SPRINGS FL 32701 2.4 CITY-ST-ZIP Change A Ch	office cr re agent al SIGNATURE 12.	egistered agent, or bo h, in t m familiar with, and accept t Signature, typed or printed na ne of re OFFIC	the State of Florida. the obligations of, Se agistered agent and title if ap	Such change was an ection 607.0505, Flori plicable (NOT 3. FORS	s, the above-named corr thorized by the corporate da Statutes. Registered Agent signature require 13.	ed when reinstaung)	Changing its r contment as reg	egistered stered
Imple       D       Delete       3.1 time       Change       A         VAME       MILLER, ANDREW W       32 NAME       3.3 STREET ADDRESS       3.3 STREET ADDRESS         2TO S. NORTHLAKE BLVD., STE. 1000       3.3 STREET ADDRESS       3.4 CITY-ST-ZIP       Change       A         MILL       ALTAMONTE SPRINGS FL 32701       3.4 CITY-ST-ZIP       Change       A         VAME       DELETE       4.1 time       Change       A         VAME       4.2 NAME       4.3 STREET ADDRESS       Change       A         STREET ADDRE SS       4.3 STREET ADDRESS       Change       A         CITY-ST-ZIP       DELETE       5.1 TITLE       Change       A         VAME       4.2 NAME       4.3 STREET ADDRESS       Change       A         STREET ADDRE SS       5.1 TITLE       Change       A         VAME       5.1 TITLE       S.1 TITLE       Change       A         STREET ADDRE SS       S.3 STREET ADDRESS       S.3 STREET ADDRESS <td>office cr re agent. I ar SIGNATURE 12. ITTLE IAME STREET ADDRE 3S</td> <td>egistered agent, or bo h, in t m familiar with, and accept t Signeture, typed or printed na he of re OFFIC D POWERS, TIMOTHY J 270 S. NORTHLAKE BI</td> <td>the State of Florida. the obligations of, Se <u>sgistered agent</u> and little if ap CERS ANC: DIRECT LVD., STE. 1000</td> <td>Such change was an ection 607.0505, Flori plicable (NOT 3. FORS</td> <td>s, the above-named con thorized by the corporat da Statutes. Registered Agent signature requir 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS</td> <td>ed when reinstaung)</td> <td>Changing its r contment as reg</td> <td>əgistered stered</td>	office cr re agent. I ar SIGNATURE 12. ITTLE IAME STREET ADDRE 3S	egistered agent, or bo h, in t m familiar with, and accept t Signeture, typed or printed na he of re OFFIC D POWERS, TIMOTHY J 270 S. NORTHLAKE BI	the State of Florida. the obligations of, Se <u>sgistered agent</u> and little if ap CERS ANC: DIRECT LVD., STE. 1000	Such change was an ection 607.0505, Flori plicable (NOT 3. FORS	s, the above-named con thorized by the corporat da Statutes. Registered Agent signature requir 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	ed when reinstaung)	Changing its r contment as reg	əgistered stered
NAME MILLER, ANDREW W 270 S. NORTHLAKE BLVD., STE. 1000 33 STREET ADDRESS CITY-ST-ZIP ALTAMONTE SPRINGS FL 32701 DELETE ALTAMONTE SPRINGS FL 32701 Change ALTAMONTE SPRINGS FL 32701 Change ALTAME STREET ADDRESS CHY-ST-ZIP	office cr rr agent a SIGNATURE 12. TITLE VAME STREET ADDRE 3S CITY-ST-ZIP TITLE NAME	egistered agent, or bo h, in t m familiar with, and accept t Signeture. typed or printed na ne of ro D POWERS, TIMOTHY J 270 S. NORTHLAKE BI <u>ALTAMONTE SPRINGS</u> D POWERS, KEVIN C	the State of Florida. the obligations of, Se spistered agent and life if ap CERS AND DIRECT LVD., STE. 1000 S FL 32701	Such change was .iu action 607.0505, Flori picable (NOT : ORS DELETE	s, the above-named control thorized by the corporated a Statutes. Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME	ed when reinstaung)	C changing its r contment as reg	egistered stered
ITTLE Change Change A VAME Change A VAME A STREET ADDRESS CITY-ST-ZIP CITY ST-ZIP CHANGE CHANGE CHANGE CHANGE STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS SA CITY-ST-ZIP CHANGE CHANGE CHANGE CHANGE STREET ADDRESS STREET ADDRESS SA CITY-ST-ZIP CHANGE CHANGE CH	office cr m agent au SIGNATURE 12. ITRE IAME STREET ADDRE 3S XTY-ST-ZIP ITRE STREET ADDRE 3S STREET ADDRE 3S	egistered agent, or bo h, in t m familiar with, and accept t Signeture, typed or printed na ne of re D POWERS, TIMOTHY J 270 S. NORTHLAKE BI <u>ALTAMONTE SPRINGS</u> D POWERS, KEVIN C 270 S. NORTHLAKE BI ALTAMONTE SPRINGS	the State of Florida. the obligations of, Se spistered agent and life if ap- CERS AND DIRECT LVD., STE. 1000 S FL 32701 LVD., STE. 1000	Such change was .iu action 607.0505, Flori pricable (NOT : ORS ) DELETE	s, the above-named con thorized by the corporat da Statutes. Registered Agent signature requir 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	ed when reinstaung)	Change	egistered stered
AAME AL 2 NAME AL 2 NAME AL 3 STREET ADDRESS CHTY-ST-ZIP AL CHTY-ST-ZIP Change	office cr m agent au SIGNATURE 12. ITILE IAME STREET ADDRE 3S XTY-ST-ZIP ITILE IAME STREET ADDRE 3S CITY-ST-ZIP ITILE IAME	egistered agent, or bo h, in t m familiar with, and accept t Signeture, typed or printed na ne of re D POWERS, TIMOTHY J 270 S. NORTHLAKE BI <u>ALTAMONTE SPRINGS</u> D POWERS, KEVIN C 270 S. NORTHLAKE BI <u>ALTAMONTE SPRINGS</u> D MILLER, ANDREW W 270 S. NORTHLAKE BI	the State of Florida. the obligations of, Se spistered agent and title if ap CERS AND DIRECT LVD., STE. 1000 5 FL 32701 LVD., STE. 1000 5 FL 32701	Such change was .iu action 607.0505, Flori pricable (NOT : ORS ) DELETE	s, the above-named conthorized by the corporat da Statutes. Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME	ed when reinstaung)	Change	egistered stered SIN 12 Addition
A4 CITY-ST-ZIP     44 CITY-ST-ZIP       ITLE     DELETE       S1T ITLE     Change       AME     52 NAME       S1 TITLE     S1 TITLE       DELETE     S1 TITLE	office cr m agent au SIGNATURE 12. ITLE IAME ITREET ADDRE 3S ITTY-ST-ZIP ITLE IAME STREET ADDRE 3S ITTY-ST-ZIP ITLE IAME ITREET ADDRE 3S ITTY-ST-ZIP	egistered agent, or bo h, in t m familiar with, and accept t Signeture, typed or printed na ne of re D POWERS, TIMOTHY J 270 S. NORTHLAKE BI <u>ALTAMONTE SPRINGS</u> D POWERS, KEVIN C 270 S. NORTHLAKE BI <u>ALTAMONTE SPRINGS</u> D MILLER, ANDREW W 270 S. NORTHLAKE BI	the State of Florida. the obligations of, Se spistered agent and title if ap CERS AND DIRECT LVD., STE. 1000 5 FL 32701 LVD., STE. 1000 5 FL 32701	Such change was .iu action 607.0505, Flori Pricable (NOT : ORS ) DELETE	s, the above-named con thorized by the corporat da Statutes. Registered Agent signature requir 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	ed when reinstaung)	AND DIRECTOF	egistered stered SIN 12 Addition
ITLE     DELETE     5.1 TITLE     Change     A       IAME     5.2 NAME     5.3 STREET ADDRESS     5.3 STREET ADDRESS       ITLE     DELETE     6.1 TITLE     Change     A	SIGNATURE SIGNATURE 12. TILE AME TREET ADDRE 3S ITY-ST-ZIP TILE AME TREET ADDRE 3S ITY-ST-ZIP TILE TREET ADDRE 3S ITY-ST-ZIP TILE	egistered agent, or bo h, in t m familiar with, and accept t Signeture, typed or printed na ne of re D POWERS, TIMOTHY J 270 S. NORTHLAKE BI <u>ALTAMONTE SPRINGS</u> D POWERS, KEVIN C 270 S. NORTHLAKE BI <u>ALTAMONTE SPRINGS</u> D MILLER, ANDREW W 270 S. NORTHLAKE BI	the State of Florida. the obligations of, Se spistered agent and title if ap CERS AND DIRECT LVD., STE. 1000 5 FL 32701 LVD., STE. 1000 5 FL 32701	Such change was .iu action 607.0505, Flori Pricable (NOT : ORS ) DELETE	s, the above-named conthorized by the corporated a Statutes. Registered Agent signature required in the corporated as t	ed when reinstaung)	AND DIRECTOF	egistered stered SIN 12 Addition
Vince         53 STREET ADDRE \$S           JTREET ADDRE \$S         54 CITY- ST-ZIP           JTLE         DELETE           6.1 TITLE         Change	office cr m agent au SIGNATURE 12. ITLE IAME ITREET ADDRE 3S ITY-ST-ZIP ITLE IAME ITREET ADDRE 3S ITY-ST-ZIP ITLE IAME ITREET ADDRE 3S ITY-ST-ZIP ITLE IAME ITREET ADDRE 3S ITY-ST-ZIP	egistered agent, or bo h, in t m familiar with, and accept t Signeture, typed or printed na ne of re D POWERS, TIMOTHY J 270 S. NORTHLAKE BI <u>ALTAMONTE SPRINGS</u> D POWERS, KEVIN C 270 S. NORTHLAKE BI <u>ALTAMONTE SPRINGS</u> D MILLER, ANDREW W 270 S. NORTHLAKE BI	the State of Florida. the obligations of, Se spistered agent and title if ap CERS AND DIRECT LVD., STE. 1000 5 FL 32701 LVD., STE. 1000 5 FL 32701	Such change was .iu action 607.0505, Flori Pricable (NOT : ORS ) DELETE	s, the above-named conthorized by the corporation of the corporation o	ed when reinstaung)	AND DIRECTOF	egistered stered SIN 12 Addition
Intel AUDIE SS         54 CITY-ST-ZIP           ITLE         DELETE         6.1 TITLE           Change         A	office cr m agent ai SIGNATURE 12. ITLE AME TREET ADDRE 3S ITY-ST-ZIP ITLE IAME TREET ADDRE 3S ITY-ST-ZIP ITLE IAME TREET ADDRE 3S ITY-ST-ZIP ITLE ITREET ADDRE 3S ITY-ST-ZIP ITLE ITREET ADDRE 3S ITY-ST-ZIP	egistered agent, or bo h, in t m familiar with, and accept t Signeture, typed or printed na ne of re D POWERS, TIMOTHY J 270 S. NORTHLAKE BI <u>ALTAMONTE SPRINGS</u> D POWERS, KEVIN C 270 S. NORTHLAKE BI <u>ALTAMONTE SPRINGS</u> D MILLER, ANDREW W 270 S. NORTHLAKE BI	the State of Florida. the obligations of, Se spistered agent and title if ap CERS AND DIRECT LVD., STE. 1000 5 FL 32701 LVD., STE. 1000 5 FL 32701	Such change was .iu ection 607.0505, Flori ORS DELETE	s, the above-named conthorized by the corporation of the corporation o	ed when reinstaung)	Change	egistered stered SIN 12 Addition
ITLE DELETE 6.1 TITLE Change A	office cr m agent ai SIGNATURE 2. TILE AME TREET ADDRE 3S iTY-ST-ZIP TILE AME TREET ADDRE 3S iTY-ST-ZIP TILE AME TREET ADDRE 3S iTY-ST-ZIP TILE AME TREET ADDRE 3S iTY-ST-ZIP TILE AME	egistered agent, or bo h, in t m familiar with, and accept t Signeture, typed or printed na ne of re D POWERS, TIMOTHY J 270 S. NORTHLAKE BI <u>ALTAMONTE SPRINGS</u> D POWERS, KEVIN C 270 S. NORTHLAKE BI <u>ALTAMONTE SPRINGS</u> D MILLER, ANDREW W 270 S. NORTHLAKE BI	the State of Florida. the obligations of, Se spistered agent and title if ap CERS AND DIRECT LVD., STE. 1000 5 FL 32701 LVD., STE. 1000 5 FL 32701	Such change was .iu ection 607.0505, Flori ORS DELETE	s, the above-named conthorized by the corporation of the corporation o	ed when reinstaung)	Change	egistered stered SIN 12 Addition
AME U.2. UVML	SIGNATURE 2. TLE AME IREET ADDRE 3S ITY-ST-ZIP TLE AME IREET ADDRE 3S ITY-ST-ZIP ITLE AME ITREET ADDRE 3S ITY-ST-ZIP ITLE AME ITREET ADDRE 3S ITY-ST-ZIP ITLE AME ITREET ADDRE 3S ITY-ST-ZIP ITLE AME ITREET ADDRE 3S ITY-ST-ZIP ITLE AME ITREET ADDRE 3S ITY-ST-ZIP ITLE AME ITREET ADDRE 3S ITY-ST-ZIP ITLE	egistered agent, or bo h, in t m familiar with, and accept t Signeture, typed or printed na ne of re D POWERS, TIMOTHY J 270 S. NORTHLAKE BI <u>ALTAMONTE SPRINGS</u> D POWERS, KEVIN C 270 S. NORTHLAKE BI <u>ALTAMONTE SPRINGS</u> D MILLER, ANDREW W 270 S. NORTHLAKE BI	the State of Florida. the obligations of, Se spistered agent and title if ap CERS AND DIRECT LVD., STE. 1000 5 FL 32701 LVD., STE. 1000 5 FL 32701	Such change was .iu ection 607.0505, Flori ORS DELETE	s, the above-named conthorized by the corporation of the corporation o	ed when reinstaung)	Change	egistered stered SIN 12 Addition
TREET ADDRESS 63. STREET ADDRESS	office cr m agent au SIGNATURE 2. ITLE AME IREET ADDRE 3S ITY-ST-ZIP ITLE AME IREET ADDRE SS ITY-ST-ZIP ITLE AME ITREET ADDRE SS ITY-ST-ZIP ITLE AME ITREET ADDRE SS ITY-ST-ZIP ITLE AME IREET ADDRE SS ITY-ST-ZIP ITLE	egistered agent, or bo h, in t m familiar with, and accept t Signeture, typed or printed na ne of re D POWERS, TIMOTHY J 270 S. NORTHLAKE BI <u>ALTAMONTE SPRINGS</u> D POWERS, KEVIN C 270 S. NORTHLAKE BI <u>ALTAMONTE SPRINGS</u> D MILLER, ANDREW W 270 S. NORTHLAKE BI	the State of Florida. the obligations of, Se spistered agent and title if ap CERS AND DIRECT LVD., STE. 1000 5 FL 32701 LVD., STE. 1000 5 FL 32701	Such change was .tu ection 607.0505, Flori ORS DELETE	s, the above-named conthorized by the corporation of the corporation o	ed when reinstaung)	Change     Change	egistered stered SIN 12 Addition Addition
64 CITY-ST-ZIP 64 CIT	office cr rr agent a SIGNATURE 12. TITLE VAME STREET ADDRE 3S CITY-ST-ZIP TITLE NAME STREET ADDRE 3S CITY-ST-ZIP TITLE NAME STREET ADDRE 3S CITY-ST-ZIP TITLE NAME STREET ADDRE 3S CITY-ST-ZIP TITLE NAME STREET ADDRE 3S CITY-ST-ZIP TITLE	egistered agent, or bo h, in t m familiar with, and accept t Signeture, typed or printed na ne of re D POWERS, TIMOTHY J 270 S. NORTHLAKE BI <u>ALTAMONTE SPRINGS</u> D POWERS, KEVIN C 270 S. NORTHLAKE BI <u>ALTAMONTE SPRINGS</u> D MILLER, ANDREW W 270 S. NORTHLAKE BI	the State of Florida. the obligations of, Se spistered agent and title if ap CERS AND DIRECT LVD., STE. 1000 5 FL 32701 LVD., STE. 1000 5 FL 32701	Such change was .tu ection 607.0505, Flori ORS DELETE	s, the above-named conthorized by the corporation of the corporation o	ed when reinstaung)	Change     Change	egistered stered SIN 12 Addition