## 3-5-98 B 2867 C FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P94000038017 (7)

CORRAL SOUTH, INC.

Principal	Place	of	Business
-----------	-------	----	----------

## **FILED** Mar 05 1998 8:00am Secretary of State



a allow

NAME   STREET ADDRESS   2665 OAK RIDGE COURT   1.3 STREET ADDRESS   1.4 CITY-ST-ZIP   TITLE   DELETE   2.1 TITLE   Change   Addition   Additi	Principal Place	e of Business	Mailing Address					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
2. Procipal Page of Business 2. Surfa Apt II. of County 3. Julia D. Ott K. County 4. Procipal Page of Business 3. Julia D. Ott K. County 4. Procipal Page of Business 3. Surfa Apt II. of County 4. County 4. County 4. County 4. County 4. County 4. County 5. County 5. County 5. County 6. Count								
2. Principal Place of Business at Melling Address   2. Melling Address   3. Date Reconstruct of Qualified   3. Applied For Surjey   3. Applied For For Surjey   3. Applied					DO NOT WRITE IN THIS SPACE			
2. Pincipal Place of Business 21	05		03					
2. Purchase Prior of Suspines 2. Purchase of Suspines 3. John Duck ROC						' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '		
22   Dubb	2. Principal Pi	lace of Business	2a. Mailing Address	^			TA <sub>I</sub>	nolied For
Suite, Apt. 4, etc.    Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.	21 2/16/5	Mat Probe Court	26 21/5 MV	Kinhe	Court	65-0407048	<del></del>	
City & State  22	Suite, Apt.	#, etc.		13/149	L.A.I.			
28	22		27			5. Certificate of Status Desired		
Tourist purchase of the properties of Country   Zep			_ ~			6. Election Campaign Financing	\$5.00	May Be
281 329   28    339   30    30    5				<u>. / L.</u>		Trust Fund Contribution		
BROWN, DAVID C., III 285 OAK RIDGE COURT FT. MYERS FL 33901  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 lis registered agent. and her lamilier with, and accept the obligations of, Section 607 0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing lis registered agent. I am Heriber with, and accept the obligations of, Section 607 0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing lis registered agent. I am Heriber with, and accept the obligations of, Section 607 0505, Florida Statutes  SIGNATURE SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. CITY -51-2P  11. ACITY -51	一 りりひょ	Country	$\vdash$ $\rho \circ \rho \circ \Lambda \wedge \cdot \vdash$		у			
BROWN, DAVID C., III 2885 OAK RIDGE COURT FT. MYERS PL 33901  11. Pursuant to the provisions of Socions 607,0502 and 607,1506, Florida Statutes, the above-memor corporation submits this statement for the purpose of changing its registered office or registered agont, or both, in the State of Florida, Such change was authorized by the corporation submits this statement for the purpose of changing its registered office or registered agont, or both, in the State of Florida, Such change was authorized by the corporation's board of directors, it hereby accept the appointment as registered office, it is familiar with, and accept the originations of Sociona 607,0505, Florida Statutes,  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. In the BROWN, DAVID C M.D.  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  16. In the BROWN, DAVID C M.D.  2865 OAK RIDGE COURT  FT MYERS FL  16. In the Canada Statutes,  16. In the Canada Statutes,  17. In the Canada Statutes,  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  10. In the Canada Statutes,  10. SIRRET ADDRESS  10. SIRRET ADD	24 557(	<u> </u>		30 11		1		_  No
285 OAK RIDGE COURT FT. MYERS PL 33901  82 Street Address (P.O. Box Number is Not Acceptable)  83   e4 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 agent. Jan melline with, and accept the obligations of, Section 07/505, Florida Statutes, be above-named corporation submits this statement for the purpose of changing its registered agent. Jan melline with, and accept the obligations of, Section 07/505, Florida Statutes, be above-named corporation's board of directors. I hereby accept the appointment as registered agent. Jan melline with, and accept the obligations of, Section 07/505, Florida Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  15. TITLE  15. DPST  16. DRST  16. DRST  17. MYERS FL  16. DRST  17. MYERS FL  17. MYERS FL  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  10. Change   Additional Changes   Add			Registered Agent	0.1	1 1 1	10. Name and Address of New Register	red Agent	
### City ### City ### Delete ###				61	Name			
B3				82	Street Add	ress (P.O. Box Number is Not Acceptable)		
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, team familiar with, and accept the obligations of, Section 607.0502, Florids Statutes.  In the Statutes of Florids Statutes of Florids Statutes agent, team familiar with, and accept the obligations of, Section 607.0503, Florids Statutes.  In the statement for the purpose of changing its registered agent, team familiar with, and accept the obligations of, Section 607.0505, Florids Statutes.  In the statement for the purpose of changing its registered agent, team familiar with, and accept the obligations of, Section 607.0505, Florids Statutes.  In the statement for the purpose of changing its registered agent, team familiar with, and accept the obligations of, Section 607.0505, Florids Statutes.  In the statement for the purpose of changing its registered agent, and the corporation is board of directors. I hereby accept the appointment as registered agent, and the corporation is board of directors. I hereby accept the appointment as registered agent, and the corporation is board of directors. I hereby accept the appointment as registered agent, and the corporation is board of directors. I hereby accept the appointment as registered appointment as registered agent, and the corporation is board of directors. I hereby accept the appointment as registered and the corporation is board of directors. I hereby accept the appointment as registered and the corporation is board of directors. I hereby accept the purposes of changing its registered and the corporation is board of directors. I hereby accept the team for accept the purpose of the purpo	FT.	MYERS FL 33901		00				
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 agent. It am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent. It am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes, and the corporation's board of directors. I hereby accept the appointment as registered agent. It am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes.  (NOTE Registered Apent sequence were revisating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. OFFICERS AND DIRECTORS IN 12  12. OFFICERS AND DIRECTORS IN 12  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  16. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  19. ADDITIONS/CHANG				03				
11. Pursuant to the provisions of Sections 607.0502 and 607.1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registere agent. I am familiar with, and accopt the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  DEST OFFICERS AND DIRECTORS  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  11. ITITLE  DPST SROWN, DAVID C M.D.  12. WAVE  SROWN, DAVID C M.D.  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. ITITLE  DROWN, DAVID C M.D.  12. WAVE  13. STREET ADDRESS  CRITY-ST-27P  TIME  DELETE  21. ITITLE  22. STREET ADDRESS  CRITY-ST-27P  TIME  DELETE  33. STREET ADDRESS  CRITY-ST-27P  14. CRITY-ST-27P  15. STREET ADDRESS  CRITY-ST-27P  TIME  DELETE  31. TIME  32. STREET ADDRESS  CRITY-ST-27P  TIME  DELETE  33. STREET ADDRESS  CRITY-ST-27P  14. CRITY-ST-27P  15. STREET ADDRESS  CRITY-ST-27P  TIME  DELETE  34. CRITY-ST-27P  TIME  DELETE  35. STREET ADDRESS  CRITY-ST-27P  TIME  DELETE  51. STREET ADDRESS  CRITY-ST-27P  TIME  CRAMP  52. STREET ADDRESS  CRITY-ST-27P  CRAMP  53. STREET ADDRESS  CRITY-ST-27P  CRAMP  54. STREET ADDRESS  CRITY-ST-27P  CRAMP  55. STREET ADDRESS  CRITY-ST-27P  CRAMP  56. STREET ADDRESS  CRITY-ST-27P  CRAMP  CRAMP  CRAMP  CRAMP  CRAMP  CRAMP  CRAMP  CRAMP  CRA				84	City	T	<b>85</b> Zip	Code
office or registered agent. In the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Socion 607/3056, Florida Statutes.    Signature tyriset or present raise of inspection agent and accept the obligations of Socion 607/3056, Florida Statutes.   Signature tyriset or present raise of inspections agent and raise of the deprocative (ROTE flagitatines Agent signature tyriset or present raise of inspections and the deprocative (ROTE flagitatines Agent signature tyriset or present raise of inspections and the deprocative (ROTE flagitatines Agent signature tyriset or present raise of signature tyriset or present raise or signature tyriset or present raise or signature tyriset or present raise or signature tyriset or signature tyriset and signature tyriset and signature tyriset or signature tyriset and signature tyriset and signature tyriset or signature tyriset or signature tyriset and signature tyriset or signature tyriset and signature tyriset and signature tyriset or signature tyriset or signature tyriset and signature tyriset or signature tyriset or signature tyriset and signature tyriset or signature tyriset and signature tyriset or signature tyriset or signature tyriset tyriset or signature tyriset or sig					ļ			
Signature report or princed raise of angiocatic agree and still et approaches (NOTE fregistered Apprets agreetable required when remeataing)   DELETE	office or re agent. I ar	io the provisions of Sections 607,0502 e <b>giste</b> red agent, or both, in the State ( m familiar with, and accept the obliga	r and 607.1508, Florida Statute of Florida. Such change was ai tions of, Section 607.0505, Flor	s, the abov uthorized b rida Statute	re-named corp y the corporat is.	poration submits this statement for the purpos tion's board of directors. I hereby accept the	se of changing it appointment as	ls registered registered
12. OFFICERS AND DIRECTORS  TITLE  BROWN, DAVID C M.D.  STREET ADDRESS  CITY-ST-ZIP  NAME  STREET ADDRESS  CITY-ST-ZIP  NAME  STREET ADDRESS  CITY-ST-ZIP  DELETE  DELETE  DELETE  1.1 ITILE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change   Additional continuation of the conti		Signature, typed or printed name of registered agen	I and tile if applicable (NOTE	Hegislered An	ient signature requir	red when reinstalion) DA	16	· · · · · · · · · · · · · · · · · · ·
TITLE BROWN, DAVID C M.D.  STREET ADDRESS CITY-ST-ZIP TITLE  DELETE  1.1 TITLE  1.2 MAME  2.2 MAME  2.2 MAME  2.2 MAME  2.3 STREET ADDRESS CITY-ST-ZIP TITLE  DELETE  3.1 TITLE  DELETE  3.1 TITLE  DELETE  4.1 TITLE  DELETE  3.1 TITLE  DELETE  3.3 STREET ADDRESS CITY-ST-ZIP  TITLE  DELETE  4.1 TITLE  DELETE  4.1 TITLE  DELETE  4.1 TITLE  DELETE  4.1 TITLE  DELETE  5.1 TITLE								RS IN 12
STREET ADDRESS CITY-ST-ZIP FT MYERS FL  1.3 STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP  1.4 CITY-ST-ZIP  1.5 STREET ADDRESS CITY-ST-ZIP  1.6 CITY-ST-ZIP  1.7 CITILE C		DPST	☐ DELETE					Addition
TITLE DELETE 2.1 TITLE CANAGE Addition AND ADDITION ADDITION AND ADDITION ADDITION AND ADDITION ADDITION AND ADDITION ADDITION AND ADDITION ADDITION AND ADDITION AND ADDITION AND ADDITION AND ADDITION ADDITION AND	NAME	BROWN, DAVID C M.D.		1.2 NAME				
TITLE    DELETE   2.1 TITLE   Change   Additional content of the property of t	STREET ADORESS			1.3 STREE	T ADORESS			
NAME STREET ADDRESS	CITY-ST-ZIP	FT MYERS FL		1.4 CITY-1	ST-ZIP			
STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  31 TITLE  Change   Addition  STREET ADDRESS  32 MAME  STREET ADDRESS  33 STREET ADDRESS  CITY-ST-ZIP  DELETE  41 TITLE  NAME  4.2 NAME  STREET ADDRESS  CITY-ST-ZIP  44 CITY-ST-ZIP  TITLE  DELETE  5.1 TITLE  DELETE  5.1 TITLE  Change   Addition  Addition  Addition  Addition  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  5.1 TITLE  DELETE  5.1 TITLE  Change   Addition  Addition  Addition  STREET ADDRESS  CITY-ST-ZIP  DELETE  5.1 TITLE  Change   Addition  Addition  Addition  STREET ADDRESS  CITY-ST-ZIP  DELETE  5.1 TITLE  Change   Addition  Addition  Addition  STREET ADDRESS  CITY-ST-ZIP  Addition  STREET ADDRESS  CITY-ST-ZIP  Addition  Addition  STREET ADDRESS  CITY-ST-ZIP  Addition  Addition  Addition  STREET ADDRESS  CITY-ST-ZIP  Addition  Addi	TITLE		DELETE	2.1 TITLE	·		☐ Change	Addition
City-St-ZiP  Tifle  DELETE  31 Tifle  32 NAME  33 STREET ADDRESS  City-St-ZiP  DELETE  4.1 Tifle  DELETE  4.1 Tifle  Addition  NAME  STREET ADDRESS  City-St-ZiP  DELETE  4.1 Tifle  Addition  NAME  STREET ADDRESS  City-St-ZiP  DELETE  4.1 Tifle  Addition  STREET ADDRESS  City-St-ZiP  DELETE  5.1 Tifle  DELETE  5.2 NAME  STREET ADDRESS  CITY-St-ZiP  DELETE  5.3 STREET ADDRESS  CITY-ST-ZiP  DELETE  6.1 Tifle  DELETE  6.1 Tifle  Addition  NAME  STREET ADDRESS  CITY-ST-ZiP  Tifle  DELETE  6.1 Tifle  Addition  NAME  STREET ADDRESS  CITY-ST-ZiP  Tifle  DELETE  6.1 Tifle  Addition  NAME  STREET ADDRESS  CITY-ST-ZiP  The DELETE  6.2 NAME  STREET ADDRESS  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 suppressmental annual report or suppressmental annual report is true and accurate and that my signature shall have the same legal effect as if made under cath, that I am an indicated on this annual report or suppressmental annual report is true and accurate and that my signature shall have the same legal effect as if made under cath, that I am an indicated on this annual report or suppressmental annual report is true and accurate and that my signature shall have the same legal effect as if made under cath, that I am annual report or suppressmental annua	NAME			2.2 NAME				
TITLE DELETE 31 TITLE	STREET ADDRESS	-		2.3 STREET	T ADDRESS			
NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  4.1 TITLE  AAddition  STREET ADDRESS  CITY-ST-ZIP  DELETE  4.2 NAME  4.2 NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  5.1 TITLE  DELETE  5.1 TITLE  Change Addition  Change Addition  Change Addition  Addition  Change Addition  Change Addition  Change Addition  Change Addition  Change Addition  Change Addition  Addition  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  5.1 TITLE  5.2 NAME  5.3 STREET ADDRESS  CITY-ST-ZIP  TITLE  AAME  6.3 STREET ADDRESS  CITY-ST-ZIP  14. I hereby certify that the information supplied with this filling 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 supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that I am an indicated on this annual report or supplied with that I am an indicated on this annual report or supplied with that I am an indicated on this annual report or supplied with that I am an indicated on this annual report or supplied with that I am an indicated on this annual report or supplied with that I am an indicated on this annual report or supplied with that I am an indicated on this annual report or supplied with that I am an indicated on this annual report or supplied with that I am an indicated on this annual report or supplied with that I am an indicated on this annual report or supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that I am an indicated on this annual report or supplied with that I am an indicated on this annual report or supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes I further certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes I further certify that the information supplied with this fil	CITY-ST-ZIP			2. 4 CITY-	ST-ZIP			
STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  4.1 TITLE  AAGDRESS  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  4.2 NAME  4.2 NAME  4.3 STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  5.1 TITLE  NAME  5.2 NAME  5.3 STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  5.1 TITLE  AAGDRESS  CITY-ST-ZIP  TITLE  DELETE  5.1 TITLE  AAGDRESS  CITY-ST-ZIP  TITLE  DELETE  6.1 TITLE  AAMME  5.2 NAMME  5.3 STREET ADDRESS  CITY-ST-ZIP  TITLE  AAMME  5.3 STREET ADDRESS  CITY-ST-ZIP  TITLE  AAMME  5.4 CITY-ST-ZIP  TITLE  AAMME  6.5 STREET ADDRESS  CITY-ST-ZIP  14.   Thereby 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 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 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 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 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 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 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 supplied with this filing does not qualify the supplied with the information supplied with this filing does not qualify the supplied with this filing does not qualify the	TITLE		☐ DELETÉ	3.1 TITLE			Change	☐ Addition
CITY-ST-ZIP  3.4. CITY-ST-ZIP  TITLE  DELETE  4.1 TITLE  AAME  4.2 NAME  4.3 STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  5.1 TITLE  AAME  5.2 NAME  5.3 STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  5.1 TITLE  AAME  5.3 STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  6.1 TITLE  AAME  5.3 STREET ADDRESS  CITY-ST-ZIP  TITLE  AAME  5.4 CITY-ST-ZIP  TITLE  AAME  5.5 NAME  5.6 NAME  5.7 NAME  5.8 STREET ADDRESS  CITY-ST-ZIP  TITLE  AAME  6.2 NAME  6.3 STREET ADDRESS  CITY-ST-ZIP  1.4   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 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 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 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 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 supplied with this filing does not qualify to the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplied with this filing does not qualify the the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that I am annual report or supplied with this filing does not qualify the properties and the properties	NAME			3.2 NAME				
TITLE  NAME  STREET ADDRESS  GITY - ST - ZIP  A.4 CITY - ST - ZIP  TITLE  DELETE  A.5 TITLE  A.4 CITY - ST - ZIP  A.6 CITY - ST - ZIP  DELETE  DELETE  S.7 TITLE  DELETE  S.8 STREET ADDRESS  GITY - ST - ZIP  DELETE  B.1 TITLE  DELETE  S.4 CITY - ST - ZIP  TITLE  DELETE  B.1 TITLE  DELETE  B.1 TITLE  Change  Addition  Change  Addition  Change  Addition  Addition  Change  Addition  Change  Addition  Change  Addition  Change  Addition  The companies of the companie	STREET ADDRESS			3.3 STREET	T ADDRESS			
NAME  STREET ADDRESS  CITY- ST-ZIP  TITLE  DELETE  5.1 TITLE  5.2 NAME  STREET ADDRESS  CITY- ST-ZIP  TITLE  DELETE  5.3 STREET ADDRESS  CITY- ST-ZIP  TITLE  DELETE  6.1 TITLE  DELETE  6.3 STREET ADDRESS  CITY- ST-ZIP  TITLE  DELETE  6.4 CITY- ST-ZIP  14.   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 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 supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that I am annual report is true and accurate and that my signature shall have the same lengt effect as if made under path; that I am annual report is true and accurate and that my signature shall have the same lengt effect as if made under path; that I am annual report is true and accurate and that my signature shall have the same lengt effect as if made under path; that I am annual report is true and accurate and that my signature shall have the same lengt effect as if made under path; that I am annual report is true and accurate and that my signature shall have the same lengt effect as if made under path; that I am annual report is true and accurate and that my signature shall have the same lengt effect as if made under path; that I am annual report is true and accurate and that my signature shall have the same lengt effect as if made under path; that I am annual report is true and accurate and that my signature shall have the same lengt effect as if made under path; that I am annual report is true and accurate and that my signature shall have the same lengt effect as if made under path; that I am annual report is true and accurate and that my signature shall have the same lengt effect as if made under path that my signature shall	CITY-ST-ZIP			3.4. CITY -	ST-ZIP			
STREET ADDRESS CITY-ST-ZIP  TITLE DELETE 5.1 TITLE S2 NAME 52 NAME 52 NAME 53 STREET ADDRESS CITY-ST-ZIP  TITLE DELETE 5.1 TITLE Change Addition CHANGE CHANGE CHANGE Addition CHANGE CHA	TITLE		☐ DELETE	4.1 TITLE			Change	Addition
CITY-ST-ZIP  TITLE  DELETE  5.1 TITLE  STREET ADDRESS  CITY-ST-ZIP  5.2 NAME  5.2 NAME  5.3 STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  6.1 TITLE  DELETE  6.2 NAME  6.2 NAME  STREET ADDRESS  CITY-ST-ZIP  1.4 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 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 supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that I am an indicated on this annual report or supplied with that I am an indicated on this annual report or supplied with that I am an indicated on this annual report or supplied with that I am an indicated on this annual report or supplied with that I am an indicated on this annual report or supplied with that I am an indicated on this annual report or supplied with that I am an indicated on this annual report or supplied with that I am an indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that I am an indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that I am an indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that I am an indicated on this annual report or 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 supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes.	NAME			4. 2 NAME	l			
TITLE    DELETE   5.1 TITLE   Change   Additional Change   Additio	STREET ADDRESS			4.3 STREET	T ADDRESS		*	
NAME  STREET ADDRESS  CITY- ST-ZIP  DELETE  DELETE  6.1 TITLE  DELETE  6.2 NAME  6.2 NAME  6.3 STREET ADDRESS  CITY- ST-ZIP  14. Thereby 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 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 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 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 supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that I am an on the supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that I am an on the supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that I am an on the supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that I am an on the supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that I am an on the supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that I am an on the supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that I am an on the supplied with the information supplied with the information supplied with this filing does not qu	CITY-ST-ZIP			4.4 CITY - S	ST-ZIP			
STREET ADDRESS  CITY-ST-ZIP  DELETE  5.3 STREET ADDRESS  5.4 CITY-ST-ZIP  6.1 TITLE  DELETE  6.1 TITLE  Change  Addition  6.2 NAME  6.3 STREET ADDRESS  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 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 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 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 supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that I am annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that I am annual report is true and accurate and the true and tr	TITLE		☐ DELETE	5.1 TITLE				Addition
CITY-ST-ZIP  5.4 CITY-ST-ZIP  TITLE  NAME  6.1 TITLE  6.2 NAME  6.3 STREET ADDRESS  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 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 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 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 supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that I am an on the content of	NAME			5.2 NAME				
TITLE    DELETE   6.1 TITLE   Change   Additional Change   Additio	STREET ADDRESS			5.3 STREET	ADDRESS			
NAME  STREET ADDRESS  GITY-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 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 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 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 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 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 of supplied with this filing does not provide the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate annual report in the exemption of the exemption					ST-ZIP			
STREET ADDRESS  6.3 STREET ADDRESS  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 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 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 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 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 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 of supplied with this filing does not provide the exemption of the exemptio	TITLE		∟ DELET <b>e</b>	6.1 TITLE			L Change	Addition
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 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 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 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 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 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 is true and accurate and the supplied with the information indicated on this annual report is true and accurate and the supplied with the information indicated on this annual report is true and accurate and the supplied with the information indicated on this annual report is true and accurate annual report is true annual report in the supplied with the information and accurate annual report is true annual report in the supplied with the information and accurate annual report is true annual report in the supplied with the information and accurate annual report in the supplied with the informati	NAME			6.2 NAME				
14. Thereby 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 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 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 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 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 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 of supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated on this annual report of supplied with the information indicated in the supplied with the supplied with the supplied with t	STREET ADDRESS			6.3 STREET	ADDRESS			
indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legat effect as if made under path, that I am an								
The state of the s	indicated o	on this annual report or supplemental.	annual report is true and accu-	rate and th	at my signatur	re shall have the same legal effect as if made	e under oath: tha	atlam an