DOCUMENT # P94000042054 1. corporation Name FAMILY FUN WASH, INC. Principal Place of Business B45-A W. TENRESSEE ST. 542 MAN 0 WAR TR TALLAHASSEE FL 32304 2. Principal Place of Business 2. Principal Place of Country <t< th=""><th>n's board of directors, i nereby accept the appointment as registered</th></t<>	n's board of directors, i nereby accept the appointment as registered
S45-A. W. TENNESSEE ST. ALLAHASSEE FL 32304 E542 MAN O WAR TR TALLAHASSEE FL 32308 2. Principal Place of Business 2a. Mailing Address 2. Principal Place of Business 2a. Mailing Address 2. Principal Place of Business 2a. Mailing Address 2. Ditter, Apt: #, etc. - 2. City & State - 3. Ditter, Apt: #, etc. - 2. City & State - 3. Ditter, Apt: #, etc. - 2. Country Zip 2. Country Zip 2. Name and Address of Current Registered Agent 81 HUGHES, J. JOSEPH 82 1017-A THOMASVILLE RD. 82 TALLAHASSEE FL 32303 83 84 City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes. SIGNATURE Signatura, typed or printed name of registered agent and title if applicable. 12. OFFICERS AND DIRECTORS 13. ITTLE DELETE 11 ITTLE Make S542 MAN-O-WAR TRAIL 13 Street Address ITTLE D DELETE 14 City-ST.2P ITTLE D DELETE 14 City-ST.2P <	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed OG/OG/1994 4. FEI Number Applied For 59-3249287 Not Applicable Status Desired 5. Certifcate of Status Desired \$8:75 Additional Fee Required 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 8. This corporation owes the current year Intangible Personal Property Tax. Personal Property Tax. Yes 10. Name and Address of New Registered Agent FL B5 DOB
ALLAHASSEE FL 32304 TALLAHASSEE FL 32308 2. Principal Place of Business 2a. Mailing Address 3. Suite, Apt. #, etc. 26 Suite, Apt. #, etc. 27 City & State 27 City & State 28 Zip Country 25 29 30 30 9. Name and Address of Current Registered Agent HUGHES, J. JOSEPH 81 1017-A THOMASVILLE RD. TALLAHASSEE FL 32303 83 84 City 11. Pursuant to the provisions of Sactions 607.0502 and 607.1508, Florida Statutes, the above-named coord office or registered agent, or both, in the State of Florida. Stoch change was authorized by the corpora agent. 1 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required agent agent agent and title if applicable. 12. OFFICERS AND DIRECTORS 13. ITLE D DELETE 11 TITLE ITLE D DELETE 23 TIREET ADDRESS ITLE D DELETE 23 TIREE ADDRESS ITTLE D </td <td>3. Date Incorporated or Qualifed 06/06/1994 4. FEI Number 59-3249287 10. Not Applicable 75.00 May Be 7rust Fund Contribution 55.00 May Be 7rust Fund Contribution 85.00 May Be Added to Fees 8. This corporation owes the current year Intangible Personal Property Tax. Yes No 10. Name and Address of New Registered Agent Sess (P.O. Box Number is Not Acceptable) FL 85 Zip Code oration submits this statement for the purpose of changing its registered n's board of directors. I hereby accept the appointment as registered Iwren reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12</td>	3. Date Incorporated or Qualifed 06/06/1994 4. FEI Number 59-3249287 10. Not Applicable 75.00 May Be 7rust Fund Contribution 55.00 May Be 7rust Fund Contribution 85.00 May Be Added to Fees 8. This corporation owes the current year Intangible Personal Property Tax. Yes No 10. Name and Address of New Registered Agent Sess (P.O. Box Number is Not Acceptable) FL 85 Zip Code oration submits this statement for the purpose of changing its registered n's board of directors. I hereby accept the appointment as registered Iwren reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
26 Suite, Apt: #, etc. 27 City & State 28 Zip City & State 29 30 9. Name and Address of Current Registered Agent HUGHES, J. JOSEPH 1017-A THOMASVILLE RD. TALLAHASSEE FL 32303 83 84 City 1. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named conofice or registered agent, or both, in the State of Florida. Such charge was authorized by the corpora agent. 1 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature. typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required agent and title if applicable. Christer Address 13. TILE D DELETE D DELETE AME BARNETT, JERI L BARNETT, JERI L 23 STREET ADDRESS 6542 MAN-O-WAR TRAIL 13 STREET ADDRESS ME D Cuerter ITHE D AME BARNETT, JERI L 14 CITY-ST-ZP <td>3. Date Incorporated or Qualifed 06/06/1994 4. FEI Number 59-3249287 10. Not Applicable 75.00 May Be 7rust Fund Contribution 55.00 May Be 7rust Fund Contribution 85.00 May Be Added to Fees 8. This corporation owes the current year Intangible Personal Property Tax. Yes No 10. Name and Address of New Registered Agent Sess (P.O. Box Number is Not Acceptable) FL 85 Zip Code oration submits this statement for the purpose of changing its registered n's board of directors. I hereby accept the appointment as registered Iwren reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12</td>	3. Date Incorporated or Qualifed 06/06/1994 4. FEI Number 59-3249287 10. Not Applicable 75.00 May Be 7rust Fund Contribution 55.00 May Be 7rust Fund Contribution 85.00 May Be Added to Fees 8. This corporation owes the current year Intangible Personal Property Tax. Yes No 10. Name and Address of New Registered Agent Sess (P.O. Box Number is Not Acceptable) FL 85 Zip Code oration submits this statement for the purpose of changing its registered n's board of directors. I hereby accept the appointment as registered Iwren reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
26 Suite, Apt:#, etc. 27 City & State 28 29 30 9. Name and Address of Current Registered Agent HUGHES, J. JOSEPH 1017-A THOMASVILLE RD. TALLAHASSEE FL 32303 83 84 City 1. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named conofice or registered agent, or both, in the State of Florida. Such charge was authorized by the corpora agent.1 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE 2. OFFICERS AND DIRECTORS 13. TLE D D DELETE Make BARNETT, JAMES H 6542 MAN-O-WAR TRAIL 13 STREET ADDRESS 6542 MAN-O-WAR TRAIL 13 STREET ADDRESS Make BARNETT, JERI L 23 STREET ADDRESS 23 STREET ADDRESS 6542 MAN-O-WAR TRAIL 23 STREET ADDRESS ITLE D DELETE AME BARNETT, JERI L 23 STREET ADDRESS 6542 MAN-O-WAR TRAIL 13 STREET ADDRESS ITLE	06/06/1994 4. FEI Number 59-3249287 5. Certifcate of Status Desired Fee Required 6. Election Campaign Financing Trust Fund Contribution 788:75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution 98:75 Additional Fee Required 8. This corporation owes the current year Intangible Personal Property Tax. 98:75 No 10. Name and Address of New Registered Agent EL 85 S(P.O. Box Number is Not Acceptable) Date Date DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
26 Suite, Apt: #, etc. 27 City & State 28 29 29 30 9. Name and Address of Current Registered Agent HUGHES, J. JOSEPH 1017-A THOMASVILLE RD. TALLAHASSEE FL 32303 83 84 City 1. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named co office or registered agent, or both, in the State of Florida. Such change was authorized by the corpora agent.1 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE 2. OFFICERS AND DIRECTORS 13. TLE D D DELETE Make BARNETT, JAMES H 6542 MAN-O-WAR TRAIL 13 STREET ADDRESS 6542 MAN-O-WAR TRAIL 13 STREET ADDRESS 14 ctry. Str.2p TALLAHASSEE FL 32308 14 ctry.Str.2p TALLAHASSEE FL 32308 12 ctry.Str.2p TALLAHASSEE FL 32308	4. FEI Number Applied For 59-3249287 Not Applicable 5. Certifcate of Status Desired \$8:75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees 8. This corporation owes the current year Intangible Personal Property Tax. Yes No 10. Name and Address of New Registered Agent
Suite, Apt: #, etc. 27 City & State 27 City & State 28 Zip Country 25 29 30 30 9. Name and Address of Current Registered Agent 81 HUGHES, J. JOSEPH 82 1017-A THOMASVILLE RD. 82 TALLAHASSEE FL 32303 83 84 City 1. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named countrice or registered agent, or both, in the State of Florida. Such change was authorized by the corpora agent. 1 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. IGNATURE Signature, typed or printed neme of registered agent and title if applicable. (NOTE: Registered Agent signature requires agent and title if applicable. IGNATURE D DELETE 11 ITILE ILE D IDELETE 11 ITILE MME BARNETT, JAMES H 12 NAME 13 STREET ADDRESS 6542 MAN-O-WAR TRAIL 13 STREET ADDRESS 23 STREET ADDRESS Vist-zip* TALLAHASSEE FL 32308 14 City*.51 zip ILE D IDELETE 21 STREET ADDRESS State Add 23 STR	
Z7 City & State Zip Country Zip Country Zip Country Zip State Zip Country Zip State Zip Country Zip State Bill Name and Address of Current Registered Agent HUGHES, J. JOSEPH 1017-A THOMASVILLE RD. TALLAHASSEE FL 32303 B4 City 1. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named countrice or registered agent, or both, in the State of Florida. Such change was authorized by the corpora agent, 1 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. IGNATURE [MOTE: Registered Agent signature requires the adaption for the obligations of Section 607.0505, Florida Statutes. IGNATURE [Mote: Registered Agent signature requires the adaption for the obligations of Section 607.0505, Florida Statutes. IGNATURE [Intel D BARNETT, JAMES H 13 STREET ADDRESS Field addet aman of registered agent and title if applicable. (NOTE: Registered Agent signatu	5. Certifcate of Status Desired Fee Required 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees 8. This corporation owes the current year Intangible Personal Property Tax. Yes 10. Name and Address of New Registered Agent ess (P.O. Box Number is Not Acceptable) FL 85 Zip Code oration submits this statement for the purpose of changing its registered In soard of directors. I hereby accept the appointment as registered Internet as registered
City & State City & State Zip Country Zip Zold Zip Country Zip Zip Zip Signature Address of Current Registered Agent 81 HUGHES, J. JOSEPH 82 Street Ad 1017-A THOMASVILLE RD. 82 Street Ad TALLAHASSEE FL 32303 83 84 Ref City 83 84 IGNATURE City Street Address authorized by the corpora agent if am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. 100 IGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature requered Agent signatered Agent signature requered Agent signatered Agent sig	Trust Fund Contribution Added to Fees 8. This corporation owes the current year Intangible Personal Property Tax. Yes 10. Name and Address of New Registered Agent Set (P.O. Box Number is Not Acceptable) FL Style Style Date DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
Zip Country Zip Country 25 29 30 9. Name and Address of Current Registered Agent 81 Name HUGHES, J. JOSEPH 81 Name 1017-A THOMASVILLE RD. 82 Street Address TALLAHASSEE FL 32303 83 84 City I. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named color 676/200 83 office or registered agent, or both, in the State of Florida. Such change was authorized by the corpora agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. 81 IGNATURE Image: Statute in the State of Florida. Such change was authorized by the corpora agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. 13 IGNATURE Image: Statute in the State of Florida. Such change was authorized by the corpora agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. 13 IGNATURE Image: Statute in the State of Florida. Such change was authorized by the corpora agent. I am familiar with, and accept the obligations of. Section 607.0505, Florida Statutes. 13 IGNATURE Image: Statute in the State of Florida. Such change was authorized by the corporation in the State of Florida. Such change was authorized by the corporation in the State of Florida. Such change was autho	Trust Fund Contribution Added to Fees 8. This corporation owes the current year Intangible Personal Property Tax. Personal Property Tax. Yes 10. Name and Address of New Registered Agent ess (P.O. Box Number is Not Acceptable) FL Sign Code Dration submits this statement for the purpose of changing its registered DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
25 29 30 9. Name and Address of Current Registered Agent 81 Name HUGHES, J. JOSEPH 82 Street Address 1017-A THOMASVILLE RD. 82 Street Address TALLAHASSEE FL 32303 83 84 City 1. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named color office or registered agent, or both, in the State of Florida. Such change was authorized by the corpora agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. IGNATURE	Personal Property Tax. Yes No 10. Name and Address of New Registered Agent Personal Property Tax. Yes No 10. Name and Address of New Registered Agent Personal Property Tax. Personal Personal
9. Name and Address of Current Registered Agent 81 Name HUGHES, J. JOSEPH 1017-A THOMASVILLE RD. 82 Street Address TALLAHASSEE FL 32303 83 84 City I. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named coordifice or registered agent, or both, in the State of Florida. Such change was authorized by the corpora agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. IGNATURE IGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature requiper technical agent and title if applicable. (NOTE: Registered Agent signature requiper technical agent and title if applicable. IGNATURE D DELETE 13. ILE D IDELETE 1.1 ITTLE ME BARNETT, JAMES H 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP NALLAHASSEE FL 32308 I.4 CITY-ST-ZIP 2.1 ITTLE ME BARNETT, JERI L 2.3 STREET ADDRESS 2.4 CITy-ST-ZIP ILE D IDELETE 2.1 ITTLE ME BARNETT, JERI L 2.3 STREET ADDRESS 2.4 CITy-ST-ZIP TALLAHASSEE FL-32308 I.4 CITy-ST-ZIP 2.4 CITy-ST-ZIP ILE <td< td=""><td>10. Name and Address of New Registered Agent 10. Name and Address of New Registered 10. Name and Address of New Registered 10. Name and Address of New Registered Interview Registered 10. Name and Address of New Registered Interview Registered Name and Address of New Registered Interview Registered Interview Registered Interview Registered ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12</td></td<>	10. Name and Address of New Registered Agent 10. Name and Address of New Registered 10. Name and Address of New Registered 10. Name and Address of New Registered Interview Registered 10. Name and Address of New Registered Interview Registered Name and Address of New Registered Interview Registered Interview Registered Interview Registered ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
HUGHES, J. JOSEPH 1017-A THOMASVILLE RD. TALLAHASSEE FL 32303 82 Street Add 84 City 85 84 City 86 City 83 87 84 City 88 84 City 88 84 City 89 84 City 84 City 84 84 City 84 84 City 84 85 Street Add 84 86 City 94 87 Street Add 85 88 Street Add 84 89 City 95 89 Street Add 96 89 City 96 80 OFFICERS AND DIRECTORS 13 12 NME 13 Street Address 95 Street Address 13 Street Address 97.57.2P TALLAHASSEE FL 32308 14 CITY-ST-ZIP 12 NME 23 Street Address 97.57.2P TALLAHASSEE FL-32308 24 CITY-ST-ZIP 12 <td>FL 85 Zip Code pration submits this statement for the purpose of changing its registered an's board of directors. I hereby accept the appointment as registered when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12</td>	FL 85 Zip Code pration submits this statement for the purpose of changing its registered an's board of directors. I hereby accept the appointment as registered when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1017-A THOMASVILLE RD. TALLAHASSEE FL 32303 82 Street Ad. 83 84 City 9 Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named conordice or registered agent, or both, in the State of Florida. Such change was authorized by the corpora agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. GNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature requires agent and title if applicable. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature requires agent and title if applicable. UE D DELETE 1.1 TITLE WE BARNETT, JAMES H 1.2 NAME Street ADDRESS 6542 MAN-O-WAR TRAIL 1.3 STREET ADDRESS Y-ST-ZIP TALLAHASSEE FL 32308 1.4 CITY-ST-ZIP LE D DELETE 2.1 TITLE WE BARNETT, JERI L 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP V-ST-ZIP TALLAHASSEE FL 32308 2.4 CITY-ST-ZIP 2.4 CITY-ST-ZIP LE D DELETE 3.1 TITLE 3.3 STREET ADDRESS Y-ST-ZIP TALLAHASSEE FL 32308 2.4 CITY-ST-ZIP 3.3 STREET ADDRESS <td>FL 85 Zip Code pration submits this statement for the purpose of changing its registered an's board of directors. I hereby accept the appointment as registered when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12</td>	FL 85 Zip Code pration submits this statement for the purpose of changing its registered an's board of directors. I hereby accept the appointment as registered when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TALLAHASSEE FL 32303 83 . Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named con office or registered agent, or both, in the State of Florida. Such change was authorized by the corpora agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. GNATURE	FL
Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named coloring or registered agent, or both, in the State of Florida. Such change was authorized by the corporal agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. GNATURE GINATURE GINATURE D OFFICERS AND DIRECTORS 13. LE D ME BARNETT, JAMES H 12 NAME 13 STREET ADDRESS Y-ST-ZIP TALLAHASSEE FL 32308 14 CITY-ST-ZIP LE ME BARNETT, JERI L 5542 MAN-O-WAR TRAIL Y-ST-ZIP TALLAHASSEE FL-32308 24 CITY-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP CALLAHASSEE FL-32308 CALLAHASSEE FL-32	FL
Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named coloring or registered agent, or both, in the State of Florida. Such change was authorized by the corporal agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. GNATURE GINATURE GINATURE D OFFICERS AND DIRECTORS 13. LE D ME BARNETT, JAMES H 12 NAME 13 STREET ADDRESS Y-ST-ZIP TALLAHASSEE FL 32308 14 CITY-ST-ZIP LE ME BARNETT, JERI L 5542 MAN-O-WAR TRAIL Y-ST-ZIP TALLAHASSEE FL-32308 24 CITY-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP CALLAHASSEE FL-32308 CALLAHASSEE FL-32	FL
office or registered agent, or both, in the State of Florida. Such change was authorized by the corpora agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. IGNATURE IGNATURE IGNATURE Ignature, typed or printed name of registered agent and title if applicable. OFFICERS AND DIRECTORS ISIGNATURE OFFICERS AND DIRECTORS ISIGNATURE, D AME BARNETT, JAMES H ISIGNATURE, SECTION DELETE ISIGNATURE, SECTION DELETE, SECTI	Iwhen reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
ME BARNETT, JAMES H 12 NAME REET ADDRESS 6542 MAN-O-WAR TRAIL 13 STREET ADDRESS TY-ST-ZIP TALLAHASSEE FL 32308 14 CITY-ST-ZIP TLE D DELETE 21 TITLE BARNETT, JERI L 22 NAME 6542 MAN-O-WAR TRAIL 23 STREET ADDRESS TY-ST-ZIP TALLAHASSEE FL-32308 24 CITY-ST-ZIP TALLAHASSEE FL-32308 24 CITY-ST-ZIP TALLAHASSEE FL-32308 24 CITY-ST-ZIP TALLAHASSEE FL-32308 33 STREET ADDRESS TV-ST-ZIP 34 CITY-ST-ZIP 10 DELETE 31 TITLE ME 32 NAME 33 STREET ADDRESS TY-ST-ZIP	
REET ADDRESS 6542 MAN-O-WAR TRAIL 1.3 STREET ADDRESS Y-ST-ZIP TALLAHASSEE FL 32308 14 CITY-ST-ZIP LE D DELETE 2.1 TITLE ME BARNETT, JERI L 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP V-ST-ZIP TALLAHASSEE FL 32308 2.4 CITY-ST-ZIP TALLAHASSEE FL 32308 2.4 CITY-ST-ZIP 2.1 TITLE ME DELETE 3.1 TITLE ME 3.3 STREET ADDRESS 3.3 STREET ADDRESS Y-ST-ZIP 3.3 STREET ADDRESS 3.3 STREET ADDRESS Y-ST-ZIP 3.4 CITY-ST-ZIP 3.4 CITY-ST-ZIP	
LE D DELETE 2.1 TTLE ME BARNETT, JERI L 22 NAME 6542 MAN-O-WAR TRAIL 2.3 STREET ADDRESS IV: ST-ZIP TALLAHASSEE FL-32308 2.4 CITY-ST-ZIP TLE DELETE 3.1 TTLE ME 3.3 STREET ADDRESS 3.3 STREET ADDRESS IV: ST-ZIP 3.4 CITY-ST-ZIP 3.4 CITY-ST-ZIP	
ME BARNETT, JERI L 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP ZIA CITY-ST-ZIP ZI	
REET ADDRESS 6542 MAN-O-WAR TRAIL 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 2.4 CITY-	Change Additi
Y ST-ZIP TALLAHASSEE FL-32308 2:4 CITY-ST-ZIP	
LE DELETE 3.1 TITLE 3.2 NAME 3.2 NAME 3.3 STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 3.4 CITY-ST-ZIP	د « میرون با استان میکانین کا میکانین کا میکان میکون میکانی می میکانی کا میکان است. میکانی میکانی
REET ADDRESS 3.3 STREET ADDRESS Y-ST-ZIP 3.4. CITY-ST-ZIP	Change Additi
34. CITY-ST-ZIP 34. CITY-ST-ZIP	
	Change Additi
4. 2 NAME	
REET ADDRESS 4.3 STREET ADDRESS	
γ.st-zip 44 CITY-st-zip LE DELETE 5.1 TITLE	Change Additi
ME 52 NAME	
5.3 STREET ADDRESS	
Y-ST-ZIP 54 CITY-ST-ZIP	Change Additi
ME 02 TOWNE REET ADDRESS 6.3 STREET ADDRESS	
6.4 CITY- ST-ZIP	
4. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in indicated on this annual report or supplemental annual report is true and accurate and that my signatulated in the supplemental annual report is true and accurate and that my signatulated in the supplemental annual report is true and accurate and that my signatulated in the supplemental annual report is true and accurate and that my signatulated in the supplemental annual report is true and accurate and that my signatulated in the supplemental annual report is true and accurate and that my signatulated in the supplemental annual report is true and accurate and that my signatulated in the supplemental annual report is true and accurate and that my signatulated in the supplemental annual report is true and accurate and that my signatulated in the supplemental annual report is true and accurate and that my signatulated in the supplemental annual report is true and accurate and the supplemental annual report is true and accurate and the supplemental annual report is true and accurate and the supplemental annual report is true and accurate and the supplemental annual report is true and accurate and the supplemental annual report is true and accurate and the supplemental annual report is true and accurate and the supplemental annual report is true and accurate and the supplemental annual report is true annual report is true and accurate and the supplemental annual report is true annual	