CO	PROFIT PROCRATION IUAL REPORT		Sande	PARTMENT OF STATE Ira B. Mortham retary of State				
JOCU	1996 JMENT # PS	9400007						
 Corporation 	ON Name							
- • -								
	ce of Business DT COLIRT		ng Address			I BOHI DOIN XON	AL OUTLY ADDDE ALLON ADION OTA	
	USTINE: FL 32084		702 DIVOT COURT ST. AUGUSTINE FL					
					3. Date Incorporated or Qua 10/04/1994	alified 3a .	Date of Last Report 04/14/1995	
Principal P	Place of Business	2a. M 26	failing Address		4. FEI Number	I ,	Applied	
Suite, Apt.	.#, etc.	si	uite, Apt. #, etc.		5. Certificate of Status Desir	red 🔲	\$8.75 Addi	
City & State	le	·	ity & State		6. Election Campaign Finance		Fee Requir \$5.00 May	ed
Zip	Country	28	q	Country	Trust Fund Contribution B. This corporation has liabil		Added to Fe	es
	25 9. Name and Address o	29		30	Florida Statutes	Ves 🚺	V o	32,
	Divot Court Nugustine FL 32084			83				
ST. Al	NUGUSTINE FL 32084	107.0502 and 607.11 → of Florida. Such ch of, Section 607.050	508, Florida Statut iange was authoriz)5, Florida Statutes	84 City tes, the above-named corp	poration submits this statement for t pard of directors. I hereby accept th	the purpose c le appointme	FL 85 Zip Code of changing its register nt as registered agent.	
ST. A	UGUSTINE FL 32084 to the provisions of Sections f ared agent, or both, in the Stati with, and accept the obligations			84 City tes, the above-named corp	ured when reinstating)	DA	FL of changing its register int as registered agent.	ed office I am
ST. A	to the provisions of Sections 6 red agent, or both, in the Stati ith, and accept the obligations Signature, typed or printed name of regis OFFIC PSD	tured agent and title if a polic ERS AND DIRECTO		84 City Ites, the above-named corp zed by the corporation's bo s. OTE Registered Agent signature requ		DA	Changing its register of changing its register int as registered agent.	ed office I am
ST. A	to the provisions of Sections for ared agent, or both, in the Stati with, and accept the obligations Signature, typed or printed name of rege OFFIC	tured agent and title if a polic ERS AND DIRECTO	cabio. (NC	84 Oity tes, the above-named corporation's bc 2eci by the corporation's bc 2eci by the corporation and the corporation's bc 1.1 0Te: Registered Agent signature required 13. 1.1 1.1 11/LE 1.2 NAME	ured when reinstating)	DA	Changing its register of changing its register int as registered agent.	ed office I am
ST. A	to the provisions of Sections 6 red agent, or both, in the Stati ith, and accept the obligations Signature, typed or printed name of regis OFFIC PSD THACKER, MICHELE	Torect agent and the Playake	Gaoo. (NG PAS DELETE	B4 City tes, the above-named corporation's bc 2eci by the corporation's bc Zeci by the corporation's bc 1.1 0Te: Registered Agent signature required 13. 1.1 1.1 11/LE 1.2 NAME 1.3 STREET ADDRESS 1.4 City-ST-ZiP	ured when reinstating)	DA	FL Is register of changing its register agent. int as registered agent. agent. ATE Intervention AND DIRECTORS IN Intervention Change A	ed office am 12 ddition
ST. Al	to the provisions of Sections (pred agent, or both, in the State ith, and accept the obligations Signature, typed or printed name of rega OFFIC PSD THACKER, MICHELE 702 DIVOT COURT	Torect agent and the Playake	cabio. (NC	B4 City tes, the above-named corp zed by the corporation's bc s. OTE Registered Agent senature requ 13. 1.1 TIFLE 1.2 NAME 1.3 STREET ADDRESS	ured when reinstating)	DA	PL Is register of changing its register agent. int as registered agent. agent. ATE Is registered agent. AND DIRECTORS IN Is change Change A	ed office I am
ST. A	to the provisions of Sections (pred agent, or both, in the State ith, and accept the obligations Signature, typed or printed name of rega OFFIC PSD THACKER, MICHELE 702 DIVOT COURT	Torect agent and the Playake	Gaoo. (NG PAS DELETE	84 City Ites, the above-named corp zed by the corporation's bo s. City OTE: Projectered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.1 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.1 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 STREET ADDRESS 2.3 STREET ADDRESS	ured when reinstating)	DA	PL Is register of changing its register agent. int as registered agent. agent. ATE Change A Change A	ed office am
ST. A	to the provisions of Sections (pred agent, or both, in the State ith, and accept the obligations Signature, typed or printed name of rega OFFIC PSD THACKER, MICHELE 702 DIVOT COURT	Torect agent and the Playake	Gaoo. (NG PAS DELETE	84 City Ites, the above-named corp zed by the corporation's bo s. Corporation's bo s. OTE: Registered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.1 TITLE 2.9 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE	ured when reinstating)	DA		ed office am
ST. All Pursuant I or register familiar wit SNATURE E E E E E E 1 ADDRESS -S1-ZIP	to the provisions of Sections (pred agent, or both, in the State ith, and accept the obligations Signature, typed or printed name of rega OFFIC PSD THACKER, MICHELE 702 DIVOT COURT	Torect agent and the Playake	CRESAL OFFICIENTIC	84 City Ites, the above-named corp zed by the corporation's bo s. City OTE: Projectered Agent signature requinance 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.1 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.9 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.1 TITLE 3.2 NAME	ured when reinstating)	DA		ed office I am 12 I2 Iddition
ST. A	to the provisions of Sections (pred agent, or both, in the State ith, and accept the obligations Signature, typed or printed name of rega OFFIC PSD THACKER, MICHELE 702 DIVOT COURT	Torect agent and the Playake	CEDIAL CIENTIAL	84 City Ites, the above-named corp zed by the corporation's bo s. Corporation's bo s. OTE: Progistered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.1 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.9 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 3.4 CITY-ST-ZIP	ured when reinstating)	DA		ed office I am 12 I2 Iddition
ST. A	to the provisions of Sections (pred agent, or both, in the State ith, and accept the obligations Signature, typed or printed name of rega OFFIC PSD THACKER, MICHELE 702 DIVOT COURT	Torect agent and the Playake	CRESAL OFFICIENTIC	84 City Ites, the above-named corporation's bo zed by the corporation's bo s. OTE: Projectered Agent signature requinance 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	ured when reinstating)	DA		ed office I am 12 I2 Iddition ddition
ST. All Pursuant f or register familiar wit SNATURE E E E E E E ADDRESS S1- ZIP E E E ADDRESS S1- ZIP E E T ADDRESS	to the provisions of Sections (pred agent, or both, in the State ith, and accept the obligations Signature, typed or printed name of rega OFFIC PSD THACKER, MICHELE 702 DIVOT COURT	Torect agent and the Playake	CEDIAL CIENTIAL	84 City Ites, the above-named corporation's bo zed by the corporation's bo s. OTE: Projectered Agent signature requinance 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2 1 TITLE 2 3 STREET ADDRESS 2 4 CITY-ST-ZIP 3 1 TITLE 3 2 NAME 3 3 STREET ADDRESS 3 4 CITY-S1-ZIP 4.1 TITLE	ured when reinstating)	DA		ed office I am 12 ddition ddition
ST. All Pursuant f or register familiar with SNATURE E E E E E E E E E E E ADDRESS S1-ZIP E E E ADDRESS S1-ZIP E E E ADDRESS S1-ZIP	to the provisions of Sections (pred agent, or both, in the State ith, and accept the obligations Signature, typed or printed name of rega OFFIC PSD THACKER, MICHELE 702 DIVOT COURT	Torect agent and the Playake	GEDIAL CIENTIAL	B4 Oity tes, the above-named corp zed by the corporation's bo s. OTE: Registered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	ured when reinstating)	DA		ed office 1 am 12 ddition ddition ddition
ST. All Pursuant f or register familiar wit INATURE E E E FT ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP	to the provisions of Sections (pred agent, or both, in the State ith, and accept the obligations Signature, typed or printed name of rega OFFIC PSD THACKER, MICHELE 702 DIVOT COURT	Torect agent and the Playake	CEDIAL CIENTIAL	B4 Oity Ites, the above-named corplated by the corporation's bost Corplate in the second of the sec	ured when reinstating)	DA		ed office 1 am 12 ddition ddition ddition
ST. All Pursuant f or register familiar with NATURE E FT ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP T ADDRESS -ST-ZIP 	to the provisions of Sections (pred agent, or both, in the State ith, and accept the obligations Signature, typed or printed name of rega OFFIC PSD THACKER, MICHELE 702 DIVOT COURT	Torect agent and the Playake	GEDIAL CIENTIAL	B4 Oity Ites, the above-named corporation's bo s. OTE: Pogstered Agent signature requined 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2 1 TITLE 2 3 STREET ADDRESS 2 4 CITY-ST-ZIP 3 1 TITLE 3 2 NAME 3.3 STREET ADDRESS 3 4 CITY-ST-ZIP 4 1 TITLE 4 2 NAME 4.3 STREET ADDRESS 4 4 CITY-ST-ZIP 5 1 TITLE 5 2 NAME 5.3 STREET ADDRESS	ured when reinstating)	DA		ed office 1 am 12 ddition ddition ddition
ST. A	to the provisions of Sections (pred agent, or both, in the State ith, and accept the obligations Signature, typed or printed name of rega OFFIC PSD THACKER, MICHELE 702 DIVOT COURT	Torect agent and the Playake	GEDIAL CIENTIAL	B4 Oity tes, the above-named corp zed by the corporation's bo s. OTE: Pogstered Agent signature requined 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 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5 1 TITLE 5 2 NAME	ured when reinstating)	DA		ed office 1 am 12 ddition ddition ddition
ST. A	to the provisions of Sections (pred agent, or both, in the State ith, and accept the obligations Signature, typed or printed name of rega OFFIC PSD THACKER, MICHELE 702 DIVOT COURT	Torect agent and the Playake	GEDIAL CIENTIAL	B4 Oity Ites, the above-named corp zeci by the corporation's bo s. OTE: Registered Agent signature requinance 13. 1.1 TIFLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2 1 TIFLE 2 2 NAME 2 3 STREET ADDRESS 2 4 CITY-ST-ZIP 3 1 TIFLE 3 2 NAME 3 3 STREET ADDRESS 3 4 DITY-ST-ZIP 4 1 TIFLE 4 2 NAME 4 3 STREET ADDRESS 4 4 CITY-ST-ZIP 5 1 TIFLE 5 2 NAME 5 3 STREET ADDRESS 5 4 CITY-ST-ZIP 6 1 TIFLE 6 2 NAME	ured when reinstating)	DA		ed office 1 am 12 ddition ddition ddition
ST. A	to the provisions of Sections 6 pred agent, or both, in the State ith, and accept the obligations Signature, typed or printed mene of region OFFIC PSD THACKER, MICHELE 702 DIVOT COURT ST. AUGUSTINE FL	tored agent and the Playake ERS AND DIRECTO 32084	GEDAL OLEITION	B4 City Ites, the above-named corporation's bost Zed by the corporation's bost 260 by the corporation's bost 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 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 5.4 CITY-ST-ZIP	ured when reinstating)	DA O OFFICERS		ed office 1 am 12 ddition ddition ddition ddition