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1995

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAY -1 PM 1:28

DOCUMENT # **P94000089352 (6)**

CADIA, INC.

28432 TAMMI DRIVE
TAVARES FL 32778

28432 TAMMI DRIVE
TAVARES FL 32778

3. Date Incorporated: 12/08/1994

3a. Date of Last Report:

4. FEI Number: 59-3281382 — Applied For / Not Applicable

5. Certificate 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 has liability for unemployment tax under s. 199.001, Florida Statutes: [ ] Yes [ ] No

9. Name and Address of Current Registered Agent

BLANCHARD, CLAYTON H
28432 TAMMI DRIVE
TAVARES FL 32778

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City: FL 85 Zip Code

11. Pursuant to the provisions of Section 607.0505, Florida Statutes, the above named corporation submits the statement for the purpose of changing its registered office or registered agent, or both, 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 Section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

D
BLANCHARD, CLAYTON H JR.
28432 TAMMI DR.
TAVARES FL 32778

D
BLANCHARD, AMY BETH
28432 TAMMI DR.
TAVARES FL 32778

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 1

[ ] Change [X] Addition
President
CLAYTON H. BLANCHARD, JR
28432 Tammi Dr.
TAVARES, FL. 32778

[ ] Change [X] Addition
Secretary/Treasurer
Amy Beth Blanchard
28432 Tammi Dr
TAVARES, FL. 32778

[ ] Change [ ] Addition

[ ] Change [ ] Addition

[ ] Change [ ] Addition

[ ] Change [ ] Addition

REMITTED BY MAIL

14. I hereby certify that the information supplied with this report is accurate and that the corporation has complied with the requirements of Section 607.0505, Florida Statutes. I further certify that the information included on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a director or officer of the corporation or the person authorized to execute the report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered officers and directors.

SIGNATURE: CLAYTON H. BLANCHARD, JR. 4/27/95 904-585-1919
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0001337 CP