

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)**

**PROFIT
CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mathison
Secretary of State
1900 Bank of America Building, S.W.
Tallahassee, Florida 32399-0001

FILED
OFFICE OF THE SECRETARY OF STATE
TALLAHASSEE, FLORIDA 32399-0001

55 JUN 26 AM 8:44

DOCUMENT # P94000091597 (2)

K & K ROOFING CO. INC.

Principal Office Address:
740 NW 106TH AVE.
PEMBROKE PINES FL 33026

Mailing Address:
740 NW 106TH AVE.
PEMBROKE PINES FL 33026

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 12/16/1994		3a. Date of Last Report	
4. FEI Number 65-0542774		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. ☐		\$5.00 May Be Added to Fees	
8. This corporation has liability for delinquent tax under s. 229.03, Florida Statutes ☒ Yes ☐ No			

9. Name and Address of Current Registered Agent VAN NOSTRAND, KEITH 740 NW 106TH AVE. PEMBROKE PINES FL 33026				10. Name and Address of New Registered Agent			
81. Name							
82. ☐ P.O. Box Number is Not Acceptable							
83.							
84. City				85. Zip Code			

11. I, the undersigned, being the president or secretary of the above named corporation, hereby certify that the above named corporation submits this 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 a resident of the state of Florida and am qualified to accept service of process.

Signature: _____ Date: _____

12. OFFICERS AND DIRECTORS		13.	
NAME: D VAN NOSTRAND, KEITH		☐ Change ☐ Addition	
ADDRESS: 740 NW 106TH AVE. PEMBROKE PINES FL 33026			
NAME: D BURNS, KIMBERLY		☐ Change ☐ Addition	
ADDRESS: 740 NW 106TH AVE. PEMBROKE PINES FL 33026			
		☐ Change ☐ Addition	
		☐ Change ☐ Addition	
		☐ Change ☐ Addition	
		☐ Change ☐ Addition	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemptions stated in law (s. 229.02, Florida Statutes). I further certify that this filing complies with the annual report or supplemental annual report as true and accurate and that my signature shall have the same legal effect as if made under oath. That I am an officer or director of the corporation or the resident or resident empowered to execute this report as required by Chapter 229, Florida Statutes, and that my name appears on the back of the filing paper or on the filing record with an address.

SIGNATURE: Keith Van Nostrand - KEITH VAN NOSTRAND 6/15/95 (305) 838-2523

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)**

PROFESSIONAL
CORPORATION
ARTIFICIAL PERSON



1995

DOCUMENT # **P94000092073 (3)**

BLUE LINE TRADING CORP.

8069 NW 54TH STREET
MIAMI FL 33166

8069 NW 54TH STREET
MIAMI FL 33166

21	3192 BIRD AVE	26	3192 BIRD AVE	4	12/21/1994	65-054-4598	Agg'd Fee Not Applicable
22	#16	27	#16	5			\$8.75 Additional Fee Required
23	MIAMI, FL	28	MIAMI, FL	6			\$5.00 May Be Added to Fees
24	33133	29	33133	8			
25	USA	30	USA	9			

9 Name and Address of Current Registered Agent

GIL, EDUARDO
8069 NW 54TH STREET
MIAMI FL 33166

10 Name and Address of New Registered Agent

81	NAME	85	STATE
82	3192 BIRD AVE #16		
83			
84	MIAMI	85	FL 33133

11. I, the undersigned, being a resident or officer of the corporation, do hereby certify that the foregoing is a true and correct statement of the facts as the same appear from the records of the corporation, and that the same are true and correct to the best of my knowledge and belief.

12	D GIL, EDUARDO 8069 NW 54TH STREET MIAMI FL 33166	13	3192 BIRD AVE MIAMI, FL 33133
	D GIL, RAMON 8069 NW 54TH STREET MIAMI FL 33166		11420 SW 115 ST MIAMI, FL 33176

14. I, the undersigned, being a resident or officer of the corporation, do hereby certify that the foregoing is a true and correct statement of the facts as the same appear from the records of the corporation, and that the same are true and correct to the best of my knowledge and belief.

SIGNATURE:

[Signature]

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

06/20/95 592-4204 (305)

*1995

CYCLOID CORPORATION

1103 9TH AVE W
BRADENTON FL 34205

21	4867 HOYER DR.	26	
22	SARASOTA FL	27	4867 HOYER DR
23		28	SARASOTA FL
24	34241	29	34241
25	USA	30	USA

12/19/1994

4. Phone Number	65-0544987	5. Agreement	Agreed to Terms
6. Additional Fee	\$8.75	7. Additional Fee Required	Yes
8. May Be Added to Fees	\$5.00	9. May Be Added to Fees	Yes

FLECK, JOHN P JR.
1103 9TH AVE W
BRADENTON FL 34205

10. Name and Address of New Registered Agent

[illegible]

D
MARSHALL, THOMAS
4867 HOYER DR
SARASOTA FL 34241

SIGNATURE

THOMAS R MARSHALL PRES 6-9-96

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

1995



DOCUMENT # P94000092295 (2)

N

L & J TRANSPORT INC.

~~3246 N. ANDREWS AVENUE~~
~~FORT LAUDERDALE FL 33309-6061~~

~~3246 N. ANDREWS AVENUE~~
~~FORT LAUDERDALE FL 33309-6061~~

12/19/1994

21 9900 RIVERSIDE DR FLA 33071 26 9900 RIVERSIDE DRIVE 65-0542890

22 #306 27 #306

23 CORAL SPRINGS FLA 28 CORAL SPRINGS FLA

24 33071 25 BROWARD 29 33071 30 BROWARD

9 Name and Address of Current Registered Agent

10 Name and Address of Registered Agent

HAGER, HENRY L
~~3246 N. ANDREWS AVENUE~~
~~FORT LAUDERDALE FL 33309-6061~~

81 HAGER HENRY L.
82 9900 RIVERSIDE DRIVE
83 SUITE 306
84 CORAL SPRINGS FL FL 85 33371

12. PSTD
HAGER, HENRY L
9900 RIVERSIDE DRIVE
CORAL SPRINGS FL 33071

13

14. SIGNATURE: *Henry L Hager* JUNE 21 1995 305 345-0243

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Jeffrey B. Martinez
Tallahassee, Florida
32399-0001

DOCUMENT # P94000092404 (0)

BALLEWS AUTOMOTIVE, INC.

1. Principal Office (If different from Mailing Address) 136 TONEY PENNA ROAD JUPITER FL 33458		Mailing Address 136 TONEY PENNA ROAD JUPITER FL 33458	
2. Fiscal Year End (Month) 21 12		2a. Mailing Agency 26 65-059616	
3. Date of Report (Month) 12/22/1994		3a. Date of Last Report	
4. Certificate of Status Desired 22 ☐ \$8.75 Additional Fee Required		4. Certificate of Status Desired 27 ☐ \$5.00 May Be Added to Fees	
5. Certificate of Status Desired 23 ☐ \$5.00 May Be Added to Fees		5. Certificate of Status Desired 28 ☐ \$5.00 May Be Added to Fees	
6. Certificate of Status Desired 24 ☐ \$5.00 May Be Added to Fees		6. Certificate of Status Desired 29 ☐ \$5.00 May Be Added to Fees	
7. Certificate of Status Desired 25 ☐ \$5.00 May Be Added to Fees		7. Certificate of Status Desired 30 ☐ \$5.00 May Be Added to Fees	

9. Name and Address of Current Registered Agent BALLEW, TONY 136 TONEY PENNA ROAD JUPITER FL 33458		10. Name and Address of New Registered Agent 81 Name 82 Mailing Agency (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	
---	--	--	--

11. I, the undersigned, being a resident of the State of Florida, do hereby certify that the above named corporation is duly organized under the laws of the State of Florida, and that the same is in good standing, and that the same is authorized to do business in the State of Florida, and that the same is a corporation organized under the laws of the State of Florida.

SIGNATURE: _____

12. OFFICERS AND DIRECTORS		13. STOCKHOLDERS	
NAME D BALLEW, TONY STREET ADDRESS 136 TONEY PENNA ROAD CITY JUPITER FL 33458		NAME D BALLEW, TONY STREET ADDRESS 136 TONEY PENNA ROAD CITY JUPITER FL 33458	
NAME D BALLEW, TONY STREET ADDRESS 136 TONEY PENNA ROAD CITY JUPITER FL 33458		NAME D BALLEW, TONY STREET ADDRESS 136 TONEY PENNA ROAD CITY JUPITER FL 33458	
NAME D BALLEW, TONY STREET ADDRESS 136 TONEY PENNA ROAD CITY JUPITER FL 33458		NAME D BALLEW, TONY STREET ADDRESS 136 TONEY PENNA ROAD CITY JUPITER FL 33458	
NAME D BALLEW, TONY STREET ADDRESS 136 TONEY PENNA ROAD CITY JUPITER FL 33458		NAME D BALLEW, TONY STREET ADDRESS 136 TONEY PENNA ROAD CITY JUPITER FL 33458	
NAME D BALLEW, TONY STREET ADDRESS 136 TONEY PENNA ROAD CITY JUPITER FL 33458		NAME D BALLEW, TONY STREET ADDRESS 136 TONEY PENNA ROAD CITY JUPITER FL 33458	
NAME D BALLEW, TONY STREET ADDRESS 136 TONEY PENNA ROAD CITY JUPITER FL 33458		NAME D BALLEW, TONY STREET ADDRESS 136 TONEY PENNA ROAD CITY JUPITER FL 33458	
NAME D BALLEW, TONY STREET ADDRESS 136 TONEY PENNA ROAD CITY JUPITER FL 33458		NAME D BALLEW, TONY STREET ADDRESS 136 TONEY PENNA ROAD CITY JUPITER FL 33458	
NAME D BALLEW, TONY STREET ADDRESS 136 TONEY PENNA ROAD CITY JUPITER FL 33458		NAME D BALLEW, TONY STREET ADDRESS 136 TONEY PENNA ROAD CITY JUPITER FL 33458	
NAME D BALLEW, TONY STREET ADDRESS 136 TONEY PENNA ROAD CITY JUPITER FL 33458		NAME D BALLEW, TONY STREET ADDRESS 136 TONEY PENNA ROAD CITY JUPITER FL 33458	

14. I, the undersigned, do hereby certify that the information supplied with this filing is a true and correct statement of the facts and circumstances as to which the same is required to be furnished, and that the same is a true and correct statement of the facts and circumstances as to which the same is required to be furnished, and that the same is a true and correct statement of the facts and circumstances as to which the same is required to be furnished.

SIGNATURE: *Tony Ballew*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-28-95

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

1995



DOCUMENT # P94000093172 (2)

SCHIAVONE & ASSOCIATES, INC.

9910 ALTERNATE A-1-A
SUITE 706
PALM BEACH GARDENS FL 33410

9910 ALTERNATE A-1-A
SUITE 706
PALM BEACH GARDENS FL 33410

12/27/1994

4	105-058-8287	☒	Acquired
			For Acquisition

5. Certificate of Station Desired **\$8.75 Additional**
Fee Required

6. ☐ **\$5.00 May Be Added to Fees**

$$\frac{d}{dt} \left(\int_{\Omega} u^2 dx + \int_{\Gamma} u^2 dS \right) = -2 \int_{\Omega} u \Delta u dx - 2 \int_{\Gamma} u \nabla_n u dS$$

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SCHIAVONE, FRANK
9910 ALTERNATE A-1-A
SUITE 706
PALM BEACH GARDENS FL 33410

81	Figure
82	Figure 1: A line graph showing the relationship between the number of people in a household and the number of people in a household who are 65 years of age or older. The x-axis is labeled 'Number of people in a household' and ranges from 0 to 10. The y-axis is labeled 'Number of people in a household who are 65 years of age or older' and ranges from 0 to 10. The graph shows a positive correlation, with the number of people 65 years of age or older increasing as the number of people in a household increases. The data points are as follows:

[illegible]

12

13.

	D
	SCHIAVONE, FRANK
	9910 ALTERNATE A-1-A, SUITE 706
	PALM BEACH GARDENS FL 33410

[illegible]

SIGNATURE: Frank Marone
(PRINT NAME AND TYPE OF BUSINESS NAME OF SIGNING OFFICER ON OTHERS)

6/20/954076946727

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)**

**PROFIT
CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Tallahassee, Florida
Tallahassee, Florida
Tallahassee, Florida

DOCUMENT # P94000093427 (0)

NOVA FINANCIAL CORPORATION

N

Principal Place of Business		Mailing Address	
621 NW 53RD ST. 320 BOCA RATON FL 33487		621 NW 53RD ST. 320 BOCA RATON FL 33487	
2. Change of Principal Business		2a. Mailing Address	
21. State: April # etc.		26. State: April # etc.	
22. City & State		27. City & State	
23. City		28. City	
24. City		29. City	
25. City		30. City	

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	3a. Date of Last Report
12/28/1994	
4. FEI Number	Applied For
65-0548473	Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required
	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	
☐ Yes ☒ No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
MCMILLEN, STACY 621 NW 53RD ST. 320 BOCA RATON FL 33487		81. Name	
		82. Street Address (P.O. Box Number is Not Acceptable)	
		83. City	
		84. City	
		85. Zip Code	

11. Pursuant to the provisions of Sections 607.0102 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office of registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0105, Florida Statutes.

SIGNATURE: _____

12. OFFICERS AND DIRECTORS		13. OFFICERS AND DIRECTORS	
NAME	ADDRESS	NAME	ADDRESS
GARY L. SHAPIRO	621 N.W. 53rd Street, Suite 320 Boca Raton, FL 33487	GARY L. SHAPIRO	621 N.W. 53rd Street, Suite 320 Boca Raton, FL 33487
EDGAR OTTO	621 N.W. 53rd Street, Suite 320 Boca Raton, FL 33487	EDGAR OTTO	621 N.W. 53rd Street, Suite 320 Boca Raton, FL 33487
GREGORY M. OTTO	621 N.W. 53rd Street, Suite 320 Boca Raton, FL 33487	GREGORY M. OTTO	621 N.W. 53rd Street, Suite 320 Boca Raton, FL 33487
STACY MCMILLEN	621 N.W. 53rd Street, Suite 320 Boca Raton, FL 33487	STACY MCMILLEN	621 N.W. 53rd Street, Suite 320 Boca Raton, FL 33487

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and that it is true and correct and that my signature shall have the same legal effect as if made under oath. That I am an officer or director of this corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 13, or Block 13a if changed, as an attachment with an address.

SIGNATURE: *Stacy McMillen* Secretary
4/21/95 (407) 241-7790
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Stacy McMillen

CR2E034 (3/95)

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

1995

DOCUMENT # P94000093504 (6)

KOLBE CONSTRUCTION SERVICES, INC.

10206 CLUBHOUSE DRIVE
BRADENTON FL 34202

10206 CLUBHOUSE DRIVE
BRADENTON FL 34202

12/27/1994

21	22	23	24	25	26	27	28	29	30
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent				
KOLBE, TODD A 10206 CLUBHOUSE DRIVE BRADENTON FL 34202					Name: <u>SAME</u> Address: <u>10206 CLUBHOUSE DRIVE, BRADENTON, FL 34202</u>				
					FL 85				

31	32	33	34	35
11. Signature of Current Registered Agent				
<u>Todd A Kolbe</u>				

12. Signature of New Registered Agent: Todd A Kolbe Date: 6/19/95

13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30				
14. Signature of Current Registered Agent: <u>Todd A Kolbe</u> Date: <u>6/19/95</u>																		8/13/95		755-1007	

SIGNATURE: Todd A Kolbe
SIGNATURE AND PRINTED NAME OF DIRECTOR OR OFFICER

CR2E034 (3/95)

SECOND NOTICE CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95 \$225 (IF DISSOLVED, MAXIMUM AMOUNT DUE TO REINSTATE \$375)

1995



DOCUMENT # P94000093524 (4)

N

L & A ENTERPRISES OF SOUTH FLORIDA, INC.

MIAMI LAKEWAY DRIVE
SUITE 210
MIAMI LAKES FL 33014

P.O. BOX 144479
CORAL GABLES FL 33114-4479

12/28/1994

65-0540667

\$8.75 Additional
Fee Required

\$5.00 May Be
Added to Fees

21 44771 Pennyroyal Drive

23 Bonita Springs, FL

24 33923

9 Name and Address of Current Registered Agent

AMERILAWYER
343 ALMERIA AVENUE
CORAL GABLES FL 33134

10 Name and Address of New Registered Agent

FL

85

11 I, the undersigned, do hereby certify that the foregoing information is true and correct to the best of my knowledge and belief, and that I am a resident of the State of Florida, and that I am qualified to act as a registered agent for the corporation named herein.

12

13

Wesley A. Allison
Resident
44771 Pennyroyal Drive
Bonita Springs, FL 33923

CR2E034 (3/95)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Wesley A. Allison

4/19/95 65-0540667

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 6/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

**PROFIT
CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
 Barbara B. Mathison
 Secretary of State
 Tallahassee, FL 32399-0001

DOCUMENT # P94000093751 (3)

GMH DEVELOPMENT GROUP, INC. - SOUTH

Principal Office Address 1665 PALM BEACH LAKES BLVD. SUITE 610 WEST PALM BEACH FL 33401		Mailing Address 1665 PALM BEACH LAKES BLVD. SUITE 610 WEST PALM BEACH FL 33401		DO NOT WRITE IN THIS SPACE 3 Date Incorporated or Qualified 12/29/1994 3a Date of Last Report 4 FET Number 23-2742053 Applied For Not Applicable 5 Certificate of Status Desired ☒ \$8.75 Additional Fee Required 6 ☐ \$5.00 May Be Added to Fees 8 This corporation has liability for intangible tax under s. 199.032, Florida Statutes: ☐ Yes ☒ No	
2 Principal Office of Business		2a Mailing Address		4 FET Number	
21 Suite, Apt. # etc.		26 Suite, Apt. # etc.		5 Certificate of Status Desired	
22 City & State		27 City & State		6	
23 Zip		28 Zip		8 This corporation has liability for intangible tax under s. 199.032, Florida Statutes	
24		29		30	
9 Name and Address of Current Registered Agent				10 Name and Address of New Registered Agent	
STEINBERGER, MARC 1665 PALM BEACH LAKES BLVD. SUITE 610 WEST PALM BEACH FL 33401				81 Name	
				82 P.O. Box Number is Not Acceptable	
				83	
				84 City	
				85 Zip Code	
11. Pursuant to the provisions of Sections 607.01(2), 607.01(3), and 607.15(8), Florida Statutes, the above named corporation submits this 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 607.01(2), Florida Statutes.					
SIGNATURE: _____ (Name of registered agent or registered agent representing) (Date)					
12 OFFICERS AND DIRECTORS					
13					
14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.02(1)(b), Florida Statutes. I further certify that this information complies with the annual report or supplementary annual report as laws and regulations are. I trust my signature shall have the same legal effect as if made under oath. That I am the officer or director of this corporation or the receiver or trustee empowered to make this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 1, or Block 1a if changed, as an authorized officer with an address.					
SIGNATURE: <u>Bruce Robinson</u> - VICE PRESIDENT 6/15/95 610 687-6521 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

CR2E034 (3/95)

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 6/30/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)**

1995

DOCUMENT # P94000094243 (0)

KAYLOR AND KAYLOR, P.A.

525 AVENUE G. N.W.
WINTER HAVEN FL 33880

525 AVENUE G. N.W.
WINTER HAVEN FL 33880

2	2a. Mailed Address	3	3a. Date of Request
21	P.O. Box 73	4	4a. Request Fee
22		5	5a. Additional Fee Required
23		6	6a. May Be Added to Fees
24	25	29	30
8. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	

KAYLOR, L. MARK 525 AVENUE G, N.W. WINTER HAVEN FL 33880	81	Name	
	82	First Address (If a New Name or New Address)	
	83		
	84	Date	
		85	File

[illegible]

12	13
D	
KAYLOR, L. MARK	
525 AVENUE G, N.W.	
WINTER HAVEN FL 33880	

[illegible]

SIGNATURE:  (941) 299-1241
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
L. Mark Kaylor