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14. I do hereby certify that the information supplied with the flung 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 supplicity annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that an effect or direction of the same legal effect as if made under oath; that	12. TITLE NAMS STREE CITY TITLE NAMS STREE CITY TITLE NAMS STREE CITY TITLE NAMS STREE CITY TITLE NAMS	NATURE Sup ELADDRESS ST-ZIP ELADDRESS ST-ZIP ELADDRESS ST-ZIP ELADDRESS ST-ZIP ELADDRESS ST-ZIP ELADDRESS ST-ZIP ELADDRESS ST-ZIP ELADDRESS	D SHARKEY, CHER 1800 COLUMBUS	ene of registered agent and the OFFICERS AND DIREC S BLVD.	I, Section 607.0505, Fic II applicable (NOT) CTORS DELETE DELETE DELETE DELETE DELETE	Frida Statutos. 11 12 13. 1.1 1.2 1.3 1.1 1.2 1.3 1.3 1.3 1.3 1.3 1.3 1.3 1.3 1.3 1.3 1.3 1.3 1.3 1.3 1.4 1.2 2.1 1.1 2.2 AME 2.3 3.4 CITY - ST - ZIP 3.1 1.1 1.1 1.2 3.3 STREET ADDRESS 3.4 2.1 4.1 1.1 4.2 1.1 4.3 3.3 1.1 1.1 4.1 1.1 5.2 1.1 5.2 <td>ation's board of directors. I hereby acc ired when reinslaing) ADDITIONS/CHANGES TO OFF</td> <td></td> <td>IRECTOR Change Change Change Change Change</td> <td>S IN 12 Addition Addition Addition Addition Addition Addition</td>	ation's board of directors. I hereby acc ired when reinslaing) ADDITIONS/CHANGES TO OFF		IRECTOR Change Change Change Change Change	S IN 12 Addition Addition Addition Addition Addition Addition
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