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I do hereby certily that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. If urther certily that information indicated 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 u Lam an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my and the same state of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my and the same state of	0/Fice or n agent 1 ar INA1 UFIE ELIADORESS -SL 201 E ELIADORESS -SL 202 E ELIADORESS -SL 202 E ELIADORESS -SL 202 E ELIADORESS -SL 202 E ELIACORESS -SL 202 E ELIACORESS -SL 202 E	egistered agent, or both, in the in familiar with, and accept if Sing at the display mind name of re- OFFICE D ZIPPERER, ANNE S 3517 PREMIER DRIVE CASSELBERRY FL 327 D PREMIER, RANDALL J 3517 PREMIER DRIVE CASSELBERRY FL 327 D SZAJKO, RAY 2502 EISENHOWER DF SOUTH BEND IN 4661 D SZAJKO, DAN 12610 LEVIN HALL RO HUNTERVILLE NC 2801	607 0502 and 607.1 no State of Florida the obligations of, Se stured agent are tille if ap FRS AND DIRECTO 07 07 07 07 07 07 07	Such change was a election 607.0505, Fic intervention 607.0505, Fic intervention for the section for the secti	as, the above-named luthorized by the corp rida Statutes Registered Agent signature 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 4.2 NAME 4.3 STREET ADDRESS 3.4. CITY-ST-ZIP 5.1 TIFLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TIFLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	ADDIT	of directors. I hereby i ign ions/CHANGES TO W. 4. th Beach W. 4+h Beach	the purpose of accept the appo DATE OFFICERS AND S & . F-1. 3 S & .	changing it: changing it: DIRECTOR Change Change Change Change Change Change Change	s registered registered S IN 12 Addilic Addilic Addilic