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Solver, April, R. etc. Solver, April	Reincipal Di		2n Mailing Address			11/28/1995	An	nlied For
27 5. Certification Status Description Feen Required City & State 6. Electron Campaign Financing Status Description Added to Fees Zip 20 Country 72 to Country 8. This corporation creates by current year Intangible Added to Fees Zip 20 30 Personal Property Tax We Into Stream And Address of New Registered Agent 10. Name and Address of New Registered Agent 10. Name and Address of New Registered Agent OTTEN, RUTH A 10530 S 20 1 ST 10. State of Charge CO. State 10. State of Charge CO. State NNGLS FL 34449 33 10530 S 2. D. 201 St. 34 4 4 3 10 State of Charge Agents of Docho and 607 1500. Perida States, the above hamed corporation fullowing the statement for the purpose of changing is registered agent. 10. State of Charge Agents of Docho and 607 1500. Perida States. 11 Purus of Temp provisions of Sections 607 1500. And 607 1500. Perida States. 10. State of Charge Agents of Charge Temping is registered agent. 12 OFTEN RUTH A 10 State of Charge Agents of Docho and 607 1500. Perida States. 10. State of Charge Agents of Docho and 607 1500. Perida States. 13 OFTEN RUTH A 10 State of Charge Agents of Docho and 607 1500. Perida States. 10. State of Charge Agents of Docho and 607 1500. Perida States. 14 Deriver Care	1		26				No	t Applicable
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International and a statutes. Internation suppled with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that it an iamal report is true and accurate and that my sonaure shall have the same lengt effect as if made under oath: that i an an an officiar of on this spantar bits repear an and and report is true and accurate and that my sonaure shall have the same lengt effect as if made under oath: that i an an an officiar of on this report as repears in made and that my sonaure shall have the same lengt effect as if made under oath: that i an an an officiar of on this report as repears in and accurate and that my sonaure shall have the same lengt effect as if made under oath: that i an an an officiar of on this samuel poor of supplemental annual report is true and accurate and that my sonaure shall have the same lengt effect as if made under oath: that i an an an appears in officiar of on this samuel poor of supplemental annual report is true and accurate and that my sonaure shall have the same lengt effect as if made under oath: that i an an an appears in officient of the deportation of the receiver of the spont of this report as preases and that my sonaure spont as preases in that i an an an appears in officient of the deportation of the receiver of the spont as preases in the same lengt effect as if made under oath: that i an an and spont are port as an advect this report as the advect as a made and that my sonaure spont as preases in that i an and accurate and that my spont as preases in the spont effect as if made under oath: that i an and accurate and that my spont as papears in advect as a made and papears in advect this report as the deport of the dep	agent.(Cal SIGNATURE	Formal and	Lawren	ice W. J	Jennings J	Ion's board of directors. Thereby accept Tr. 4/1 red when reinstating)	15/99	
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4. I hereby certify that the information supplied with this filing 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 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 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 name appears in	SIGNAT ORE 2. TILE AME TREET ADDRESS TTY-ST-ZIP TILE TREET ADDRESS TTY-ST-ZIP TILE TREET ADDRESS	Symalline, typed or primted name of herestered OFFICERS P OTTEN, RUTH A 10530 SE 201 ST INGLIS FL 34449 V OTTEN, GERALD H 10530 SE 201 ST INGLIS FL 34449	Jagent and tipe (happelcable. AND DIRECTORS DELE DELE DELE DELE DELE DELE	ICCE W. ICC (NOTE: Register 13 TE 1.1 12 1.3 14 12 TE 2.1 2.3 2.4 TE 3.1 Solution 3.4 TE 5.1 5.2 5.3 5.4 5.1 TE 6.1	Jennings J ad Agent signature requir TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	In s board of directors. Thereby accept ADDITIONS/CHANGES TO OFFI President Lawrence W. Jennin 10530 S.E. 201 St. Inglis, FL. 3444 Sec/Treas. Wendy Jennings 10530 S.E. 201 St.	the appointment as re DATE ICERS AND DIRECTO Change Change Change Change	DRS IN 12 Addition
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