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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

 Secretary of State DIVISION OF CORPORATIONS

1997

FILED May 22 1997 8:00am Secretary of State

DOCUMENT # P9600032678 (0) 1. Corporation Name C & D UNLIMITED, INC. Principal Place of Business Mailing Address					
5910 SE ABSHIER BLVD OCALA FL 34420		5910 SE ABSHIER BLV OCALA FL 34420-4046	U		
				3. Date Incorporated or Qualified 04/11/1996	3a. Date of Last Report
2. Principal	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	A A A	26		PF 87576	Not Applicable
Suite, Apl	1 #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & Sta	16	City & State		6. Election Campaign Financing	\$5.00 May Be
:3		28		Trust Fund Contribution	Added to Fees
Ζφ 24	Country 25	Ζ(ρ 29	Country 30	8. This corporation has liability for Florida Statutes	intangible tax under s. 199.032,
<u>~1</u>	9. Name and Address of Curi			10. Name and Address of New Re	
PA	ILMQUIST, DALE		81 Name		
2749 NE 60 LANE		82 Street Add	Iress (P.O. Box Number is Not Accepta	lble)	
00	CALA FL 34479				
			83		
					1-1 L. A.
			84 City		85 Zip Code
	Alaba Da	0502 and 607,1508, Florida Ste ate of Florida. Such change wa digations of, Section 607,0505,		poration submits this statement for the ation's board of directors. I hereby acce	purpose of changing its registered opt the appointment as registered
SIGNATURE	Signature, byted or printed rame of equitative OFFICERS A	agent and Yeld applicable (I	atutes, the above-named corporal sauthorized by the corporal Florida Statutes. NOTE: Registered Agent signature requirements.		purpose of changing its registered opt the appointment as registered OU-22-97 DATE CERS AND DIRECTORS IN 12
SIGNATURE 12. Title	Signature, Ignation printer are of organized OFFICERS A	agent and) (e.d. applicable (f	atutes, the above-named corporal sauthorized by the corporal Florida Statutes. NOTE: Registered Apant signature required. 13. 1.1 TILE	lited when reinstating)	purpose of changing its registered opt the appointment as registered 04-22-97 DATE
SIGNATURE 1 2. Title Name	Signature, lighted or prohibination of beginning of PSD PALMOUST, DALE	agent and Yeld applicable (I	ntutes, the above-named corps as authorized by the corpora Florida Statutes. NOTE: Registered Agent signature required. 1.1 TITLE 1.2 NAME	lited when reinstating)	purpose of changing its registered opt the appointment as registered 99-22-97 DATE CERS AND DIRECTORS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS	Signature, lighted or prohibination of beginning of PSD PALMOUST, DALE	agent and Yeld applicable (I	ntutes, the above-named corps as authorized by the corpora Florida Statutes. NOTE: Registered Agent signature requirements of the statutes of	lited when reinstating)	purpose of changing its registered opt the appointment as registered OU-22-97 DATE CERS AND DIRECTORS IN 12
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