P96000049398

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

June 10, 1996

GEORGE R. BORDERS
1320 HENDRICKS AVE.
JACKSONVILLE, FL. 32207

SUBJECT: FLORIDA BAPTIST AUXILIARY ENTERPRISES, INC.

This letter will confirm that due to a clerical error the above referenced corporation was incorrectly filed as a NONPROFIT corporation. Please be advised, we have corrected our records to reflect this corporation as a PROFIT corporation and assigned new document number P96000049398 with the original file date of April 4, 1991.

Any annual reports submitted this office should reflect the new document number.

We sincerely apologize for any inconvenience this error may have caused you.

Should you have any questions please feel free to contact this office at the address indicated below.

Sincerely,
Sharon Tala
Document Specialist Supervisor
New Filings Section

Letter number: 896A00028845

P96000049398

Law Offices
SMITH AND SMITH, P.A.
2601 University Boulevard West
JACKSONVILLE, FLORIDA 32217-2212
Telephone 904/733-2000

STEPHEN P. SMITH, JR.
ALEXANDER G. SMITH
STEPHEN P. SMITH III

April 3, 1991

Secretary of State
Division of Corporations
P. O. Box 6327
Tallahassee, Florida 32314

Attention: Ms. Jo Mynard

Dear Ms. Mynard:

Please find enclosed Articles of Incorporation for the following charters which I ask that you please file:

1. Florida Baptist Financial Services, Inc., a non-profit corporation;

2. Florida Baptist Investment Services, Inc., a non-profit corporation;

3. Florida Baptist Auxiliary Enterprises, Inc., a non-profit corporation.

Also enclosed is our check in the amount of $367.50 to cover the cost of filing the charters and for a certified copy of each. I will appreciate it very much if you will file these just as soon as possible and forward us a certified copy of each.

If you need anything further, please telephone me or my secretary, Mrs. Loretta Pollan, collect at the above number.

With many thanks, I am

Yours very truly,

N42832

SPSJr/lp
Enclosures

FILED
1991 APR -4 PM 2:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
1991 APR -4 PM 2:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
OF
FLORIDA BAPTIST AUXILIARY ENTERPRISES, INC.

The undersigned, acting as Incorporator of a corporation under the Florida Business Corporation Act, adopts the following Articles of Incorporation of such corporation.

ARTICLE I

The name of this corporation shall be: FLORIDA BAPTIST AUXILIARY ENTERPRISES, INC.

ARTICLE II

The duration of the corporation is perpetual, unless dissolved according to law.

ARTICLE III

The number constituting the initial Board of Directors of the corporation is four, and the names and addresses of the persons who are to serve initially are:

NAME	ADDRESS
Carl P. Arant, Jr.	4101 U.S. 27 North, Sebring, FL 33870
James L. Stallings	P. O. Box 1865, Wauchula, FL 33873
Roy W. Kendall	P. O. Box 1351, Tampa, FL 33601
John C. Mitchell III	201 East Pine Street, Suite 700, Orlando, Florida 32801

ARTICLE IV

The authorized capital stock of this corporation shall be ten thousand (10,000) shares of common stock, having a par value of Ten ($10.00) Dollars.

ARTICLE V

The name and address of the incorporator is:

Charles N. Suttles	245 Riverside Avenue, Jacksonville, FL 32202

ARTICLE VI

The name of the officer who is to manage the affairs of the corporation until the first election or appointment under the Charter and By-Laws shall be:

Chairman of the Board of Directors	Charles N. Suttles, 245 Riverside Avenue, Jacksonville, Florida 32202

ARTICLE VII

The street address of the initial registered office of the corporation is:

1230 Hendricks Avenue
Jacksonville, FL 32207

and the name and the street address of the initial registered agent of this corporation is:

George R. Borders
1230 Hendricks Avenue
Jacksonville, Florida 32207

IN WITNESS WHEREOF, the undersigned incorporator has executed these Articles of Incorporation this 1st day of April, 1991.

CHARLES N. SUTTLES

STATE OF FLORIDA
COUNTY OF DUVAL

The foregoing instrument was acknowledged and sworn to before me this 1st day of April, 1991, by CHARLES N. SUTTLES, as incorporator of FLORIDA BAPTIST AUXILIARY ENTERPRISES, INC.

Notary Public, State of Florida at Large.

My Commission Expires:

NOTARY PUBLIC, STATE OF FLORIDA
MY COMMISSION EXPIRES: MAR. 21, 1992.
BONDED THRU NOTARY PUBLIC UNDERWRITERS.

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED

FILED
1991 APR -4 PM 2:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

In pursuance of Chapter 48.091, Florida Statutes, the following is submitted in compliance with said Act:

First, that FLORIDA BAPTIST AUXILIARY ENTERPRISES, INC., Jacksonville, Duval County, Florida, has named GEORGE R. BORDERS, located at 1230 Hendricks Avenue, Jacksonville, Florida, 32207, as its agent to accept service of process within this State.

Having been named to accept service of process for the above stated corporation, at the place designated in this certificate, I hereby accept to act in this capacity and agree to comply with the provisions of said act relative to keeping open said office.

BY: George R. Borders
GEORGE R. BORDERS
Registered Agent

FILE NOW! CORPORATE STATUS WILL BE DELINQUENT AFTER JULY 1ST.

CORPORATION

ANNUAL REPORT

1992

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DR1192

APPROVED
SEC. OF STATE
CORPORATIONS DIV.
TALLAHASSEE, FLA.
FILED

DO NOT WRITE IN THIS SPACE

BRING IT $61.25 Make Payable To *Secretary of State*

1. Name and Mailing Address of Corporation

DOCUMENT # P96000049398

FLORIDA BAPTIST AUXILIARY ENTERPRISES, INC.
~~1230 HENDRICKS AVE.~~
JACKSONVILLE FL 32207-8619

If above address is incorrect in any way, line through the incorrect information and enter correct address in Block 2

2. If Address in Block 1 is incorrect in any way, line through the incorrect information and enter the correct address below. PO Box is acceptable. The NAME of the corporation can be changed only by filing an amendment.

21 Mailing Address: 1320 Hendricks Avenue

22 PO Box No

23 City and State | 24 Zip Code

3. Date Incorporated or Qualified To Do Business in Florida: 04/04/1991

3a. Date of Last Report: 3-25-91

4. FEI Number: ~~X~~ 59-0696288

FEI Number Applied For

FEI Name or Not Applicable

5. $8.75

CERTIFICATE OF STATUS DESIRED

6. Names and Street Addresses of Each Officer and Director (Do not use any correction tape, or fluid to cover over incorrect information)

	Title 1	Names of Officers and Directors 2	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) 3	City and State 4
1	D	~~ARANT, CARL A., JR.~~	~~4101 U.S. 27 NORTH~~	~~SEBRING, FL.~~
1a				
2	D	STALLINGS, JAMES L.	✓P O BOX 1865 ~~708 Louisianna Street~~	WAUCHULA, FL.
2a				
3	E/D/T	Borders, George R.	3162 Old Port Circle E.	Jacksonville, FL
	D	~~KENDALL, ROY W.~~	~~P.O. BOX 1351~~	~~TAMPA, FL.~~
3a				
4	D	MITCHELL, JOHN C., III	201 E. PINE ST.	ORLANDO, FL.
4a				
5	D	SUTTLES, CHARLES N.	245 RIVERSIDE AVE.	JACKSONVILLE, FL.
5a				
6	D	Hagood, C. Scott	4020 SE 38th Street	Ocala, FL
	D	McCollum, Brenda	5217 NW 25th Place	Gainesville, FL

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

BORDERS, GEORGE R.
~~1230 HENDRICKS AVE.~~
JACKSONVILLE, FL. 32207

8. Name and Address of New Registered Agent

81 Name

82 Street Address 1 (Do NOT Use P.O. Box Number): 1320 Hendricks Avenue

83 Street Address 2 (Do NOT Use P.O. Box Number)

84 City: FL. | 85 Zip Code

9. Pursuant to the provisions of Sections 607.0502 and 607.1508 or Sections 617.0502 and 617.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ DATE May 20, 1992
(Registered Agent Accepting Appointment)

10. This corporation has liability for intangibles tax under S. 199.032, Florida Statutes. Yes ___ No X (Check one and see instructions for explanation.)

11. I 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; I further certify 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 or Chapter 617, Florida Statutes; and that my name appears in Block 1 or Block 2 above, or on an attachment with an address.

SIGNATURE _____ DATE

Typed Name of Signing Officer or Director	Title	Telephone Number Daytime
George R. Borders	President	(904) 396-2351x.290

12. Should you wish to contribute to the Election Campaign Financing Trust Fund, check the box and include an additional $5.00 to the filing fee. ☐

CR2E041 (11/91)

File Now. Filing Fee after May 1 is $[illegible]

CORPORATION ANNUAL REPORT 1993

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

APPROVED

1. Name and Mailing Address of Corporation DOCUMENT # P96000019398

FLORIDA BAPTIST AUXILIARY ENTERPRISES, INC.
1320 HENDRICKS AVE
JACKSONVILLE FL 32207-8621

If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2.

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/04/1991
3a. Date of Last Report: 08/11/1992

FILING FEE $000.00
ANNUAL REPORT $61.25 + $138.75 CORPORATION SUPPLEMENTAL FEE
MAKE CHECK PAYABLE TO DEPARTMENT OF STATE

4. FEI Number: 590096288 — Applied For / Not Applicable

2. Mailing Address
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Principal Place of Business
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

5. Certificate of Status Desired ☐
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ — $138.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☑ No

9. Name and Address of Current Registered Agent

BORDERS, GEORGE R.
1320 HENDRICKS AVE
JACKSONVILLE FL 32207

10. Name and Address of New Registered Agent
61 Name
62 Street Address (P.O. Box Number is Not Acceptable)
63
64 City FL 65 Zip Code 66 Country

11. Pursuant to the provisions of Sections 607.0502 and 607.1508 or Sections 617.0502 and 617.1508, 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 607.0505, Florida Statutes.

SIGNATURE ______ Registered Agent Accepting Appointment DATE ______

12. OFFICERS AND DIRECTORS		13. OFFICERS AND DIRECTORS CHANGES	
1.1 TITLE 1.2 NAME 1.3 ADDRESS 1.4 CITY-ST-ZIP	D MCCOLLUM, BRENDA 5217 NW 29TH PL GAINESVILLE FL	1.1 TITLE 1.2 NAME 1.3 ADDRESS 1.4 CITY-ST-ZIP	
2.1 TITLE 2.2 NAME 2.3 ADDRESS 2.4 CITY-ST-ZIP	~~D~~ ~~STALLINGS, JAMES L.~~ ~~700 LOUISIANA STREET~~ ~~WAUCHULA FL~~	2.1 TITLE 2.2 NAME 2.3 ADDRESS 2.4 CITY-ST-ZIP	D Arant, Suzanne B. 4520 Bunker Drive Sebring, FL 33872
3.1 TITLE 3.2 NAME 3.3 ADDRESS 3.4 CITY-ST-ZIP	E/D/T BORDERS, GEORGE R 3162 OLD PORT CIRCLE E JACKSONVILLE FL	3.1 TITLE 3.2 NAME 3.3 ADDRESS 3.4 CITY-ST-ZIP	
4.1 TITLE 4.2 NAME 4.3 ADDRESS 4.4 CITY-ST-ZIP	D MITCHELL, JOHN C., III 201 E. PINE ST. ORLANDO FL	4.1 TITLE 4.2 NAME 4.3 ADDRESS 4.4 CITY-ST-ZIP	
5.1 TITLE 5.2 NAME 5.3 ADDRESS 5.4 CITY-ST-ZIP	~~D~~ ~~SUTTLES, CHARLES N.~~ ~~845 RIVERSIDE AVE.~~ ~~JACKSONVILLE FL~~	5.1 TITLE 5.2 NAME 5.3 ADDRESS 5.4 CITY-ST-ZIP	
6.1 TITLE 6.2 NAME 6.3 ADDRESS 6.4 CITY-ST-ZIP	D HAGOOD, C SCOTT 4020 SE 38TH STREET OCALA FL	6.1 TITLE 6.2 NAME 6.3 ADDRESS 6.4 CITY-ST-ZIP	

14. I 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. I further certify 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 or Chapter 617, Florida Statutes, and that my name appears in Block 12, Block 13, a change, or on an attachment with an address.

SIGNATURE [signature] DATE 4/8/93

Print/Type Name of Signing Officer or Director: George R. Borders
Title(s): Executive Director-Treas.
Daytime Telephone Number: (904) 346-0325

CR2E031 (11/92)

FILE NOW: FILING FEE AFTER MAY 1 IS $226.00

CORPORATION ANNUAL REPORT **1994**

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

94 MAY 12 AM 9:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Corporation Name

FLORIDA BAPTIST AUXILIARY ENTERPRISES, INC.

DOCUMENT # P96000049398

Mailing Address
1320 HENDRICKS AVE
JACKSONVILLE FL 32207

Principal Place of Business
1320 HENDRICKS AVE
JACKSONVILLE FL 32207

If above addresses are incorrect in any way, line through incorrect information and enter corrected below.

DO NOT WRITE IN THIS SPACE

2. Mailing Address
21

2a. Principal Place of Business
26

Suite, Apt. #, etc.
22

Suite, Apt. #, etc.
27

City & State
23

City & State
28

Zip 24 | Country 25

Zip 29 | Country 30

3. Date Incorporated or Qualified: 04/04/1991

3a. Date of Last Report: 04/19/1993

4. FEI Number: 59-0696288 — Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired $6.75 ☐

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Form

7. Nonprofit Exempt from $130.75 Supplemental Fee ☐

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

BORDERS, GEORGE R.
1320 HENDRICKS AVE
JACKSONVILLE FL 32207

10. Name and Address of New Registered Agent

01 Name

02 Street Address (P.O. Box Number is Not Acceptable)

03

04 City FL 05 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1509 or Sections 617.0502 and 617.1509, 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 607.0505 or 617.0503, Florida Statutes.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required for reinstating)

12. OFFICERS AND DIRECTORS		13. CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE	~~D~~	D
1.2 NAME	~~MCCOLLUM, BRENDA~~	Lopez, Miguel A., Sr.
1.3 STREET ADDRESS	~~5217 NW 25TH PL~~	1450 Madruga Ave., Suite 210
1.4 CITY-ST-ZIP	~~GAINESVILLE FL~~	Coral Gables, FL 33146
2.1 TITLE	~~D~~	D
2.2 NAME	~~ARANT SUZANNE B~~	Brantley, Suzanne
2.3 STREET ADDRESS	~~4520 BUNKER DRIVE~~	1125 Savannah Trace
2.4 CITY-ST-ZIP	~~SEBRING FL~~	Tallahassee, FL 32312
3.1 TITLE	E/D/T	
3.2 NAME	BORDERS, GEORGE R	
3.3 STREET ADDRESS	3162 OLD PORT CIRCLE E	
3.4 CITY-ST-ZIP	JACKSONVILLE FL	
4.1 TITLE	D	
4.2 NAME	MITCHELL, JOHN C., III	
4.3 STREET ADDRESS	201 E. PINE ST.	
4.4 CITY-ST-ZIP	ORLANDO FL	
5.1 TITLE	D	
5.2 NAME	HAGOOD, C SCOTT	
5.3 STREET ADDRESS	4020 SE 38TH STREET	
5.4 CITY-ST-ZIP	OCALA FL	
6.1 TITLE		
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

700001165777
-04/19/93--93025--017
****800.00 ****225.00

700001165777
-04/19/93--93025--017
****800.00 ****225.00

AB 5-12

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 119.07(3)(i), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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 have fulfilled all obligations concerning unclaimed property imposed by Chapter 717, Florida Statutes; 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 or Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ 5-10-94 (904) 346-0325
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

George R. Borders, Executive Director-Treasurer

FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUN 13 AM 11:57

DOCUMENT # P96000049398

1. Corporation Name

FLORIDA BAPTIST AUXILIARY ENTERPRISES, INC.

Principal Place of Business	Mailing Address
1320 HENDRICKS AVE JACKSONVILLE FL 32207	1320 HENDRICKS AVE JACKSONVILLE FL 32207

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/04/1991
3a. Date of Last Report: 05/12/1994
4. FEI Number: 59-0696288 — Applied For / Not Applicable
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ — $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

BORDERS, GEORGE R.
1320 HENDRICKS AVE
JACKSONVILLE FL 32207

10. Name and Address of New Registered Agent

31 Name
32 Street Address (P.O. Box Number is Not Acceptable)
33
34 City — FL — 35 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1608, 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 607.0505, Florida Statutes.

SIGNATURE: _____ DATE
(Signature, typed or printed name of registered agent and title if signed for NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	D ☐ Change ☒ Addition
NAME	LOPEZ, MIGUEL A., SR.	1.2 NAME	Jones, Cecil S.
STREET ADDRESS	1450 MADRUGA AVE., SUITE 210	1.3 STREET ADDRESS	~~Box 510159~~ 1808 Pine St.
CITY-ST-ZIP	CORAL GABLES FL 33146	1.4 CITY-ST-ZIP	~~Melbourne Beach~~, FL 32951
TITLE	D	2.1 TITLE	D ☐ Change ☒ Addition
NAME	BRANTLEY, SUZANNE	2.2 NAME	Knepper, Randolph L.
STREET ADDRESS	1125 SAVANNAH TRACE	2.3 STREET ADDRESS	4545 Bohemia Place
CITY-ST-ZIP	TALLAHASSEE FL 32312	2.4 CITY-ST-ZIP	~~Pensacola, FL 32504-8559~~
TITLE	~~EVP~~ Pres.	3.1 TITLE	☐ Change ☐ Addition
NAME	BORDERS, GEORGE R	3.2 NAME	
STREET ADDRESS	3162 OLD PORT CIRCLE E	3.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL	3.4 CITY-ST-ZIP	
TITLE	~~SP~~	4.1 TITLE	☐ Change ☐ Addition
NAME	~~MITCHELL, JOHN C. II~~	4.2 NAME	
STREET ADDRESS	~~241 E. PINE ST.~~	4.3 STREET ADDRESS	
CITY-ST-ZIP	~~ORLANDO FL~~	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	☐ Change ☐ Addition
NAME	HAGOOD, C SCOTT	5.2 NAME	
STREET ADDRESS	4020 SE 38TH STREET	5.3 STREET ADDRESS	
CITY-ST-ZIP	OCALA FL	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ George R. Borders, Pres. 6/1/95 (904) 346-0325
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0001402