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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # **P96000073848 (9)** 

KIM R. STANLEY, AGENCY, INC.

Principal Place of Business

Mailing Address

## FILED Mar 18 1997 8:00am Secretary of State



1803 BTH STREET NORTH JACKSONVILLE BEACH FL 32250		1803 8TH STREET NORTH JACKSONVILLE BEACH FL 32250-4836				
				3. Date Incorporated or Qualified 09/01/1996	3a. Date of Las	Report
2. Principal Pa		2a. Mailing Address		4. FEI Number		Applied For
	emove Rd	26 22 Semi	UDE BY	<u>99</u> 340235	5	Not Applicable
Suite, Apr. #		Suite, Apt #, etc		5. Certificate of Status Desired	+ 1 '	5 Additional Required
City & State 23	intic Beb F1	City & State  28 Characte	Bch FI	6. Election Campaign Financing Trust Fund Contribution		00 May Be ad to Fees
24 323	33 25 DVW		30 DUVal		Yes No	er s. 199.032,
	9. Name and Address of Cu	rrent Registered Agent	04] 11	10. Name and Address of New Re	gistered Agent	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
180	anley, Kim R 13 8th Street North Eksonville Beach Fl 322	250	81 Name 82 Street Add	dress (P.O. Box Number is Not Acceptate  Atomic Bea	Kaud Kaud	ey
			84 City		_ FL	ip Code
office or re agent 1 ag SIGNATURE	gistered agont or both, in the S I large ar with, and accorditie of	State of Florida. Such change was a obligations of, Section 607.0505, Florida (Control of Control	authorized by the corpor orida Statutes.	orporation submits this statement for the praction's board of directors. I hereby acceptation's board of directors and the statement for the province of the p	of the appointment	as registered
SIG WHOME	i jin e 2007 ji sali iz prated name bli og sten		F. Registered Agent signature req		DATE	
12.	OFFICERS	AND DIRECTORS	E Registered Agent signature req	ured when reinstaling) ADDITIONS/CHANGES TO OFFICE	CERS AND DIRECT	
	OFFICERS D					
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information indicated on this answereport or supplemental annual report is true and accurate and that my signature shall have the same legal effect as it 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 Block 12 or Block 13 it changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICEA OR DIRECTOR

3-10-97 904247675

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