Zip       Country       Zip       Country       5. Certificate of Status Desired       \$8.75 Addition         6. Name and Address of Current Registered Agent       7. Name and Address of New Registered Agent       Name         WOODS, SCHUYLER V       \$121 S. ANCHOR LAKE DR       Street Address (P.O. Box Number is Not Acceptable)       End of Status Desired       Street Address (P.O. Box Number is Not Acceptable)         SUITE 3       SANTA ROSA BCH FL 32459       City       FL       Zip Code         8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and the obligations of registered agent.       9. 30. 0.3         SIGNATURE       Signature, type printed name diregistered agent and late if applicable       (NOTE: Registered Agent Signature required when reinstating)       Date         FILE NOW!!!       FE IS \$150.00       Atter May 1, 2003 Fee will be \$550.00       Steed Agent Signature required when reinstating)       Date         10.       OFFICERS AND DIRECTORS       11.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN True Fund Contribution.       Stood Added to Interface Contribution.         11.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS       11.       Added to Interface Contribution.         11.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN THE MARE STREET ADDRESS GIVY-ST-ZP       SANCHORS LAKE DRIVE STATE       STREET ADDRESS STAND AR	ed For pplicable
#21 Š. ANCHORS LAKE DRIVE SANTA ROSE BEACH FL 32429       #21 Š. ANCHORS LAKE DRIVE SANTA ROSE BEACH FL 32429         2. Principal Place of Business       3. Mailing Address         Suite, Apt. #, etc.       Suite, Apt. #, etc.         City & State       City & State         Zip       Country         Zip       Country         Zip       Country         Suite, Apt. #, etc.       Suite, Apt. #, etc.         City & State       4. FEI Number         59-3454860       Applie         Name and Address of Current Registered Agent       7. Name and Address of New Registered Agent         WOODS, SCHUYLER V       Street Address (P.O. Box Number is Not Acceptable)         SUITE 3       SANTA ROSA BCH FL 32459         SIGNATURE       City - FL       Zip Code         SIGNATURE       Woods, Schuyt bit is statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familier with, and the obligations of registered agent.       Woods, Schuyt bit is statement for the purpose of changing its registered agent experimentation.       Woods, Schuyt bit is address for Applie agent	ed For pplicable
2. Principal Place Droubliness       3. Mailing Address         Suite, Apt. #, etc.	ed For pplicable
City & State       City & State       4. FEI Number 59-3454860       Applied Not Ag         Zip       Country       Zip       Country       5. Certificate of Status Desired       \$8.75 Addition Fee Required         WOODS, SCHUYLER V       Name       Name       Name       Street Address of New Registered Agent         WOODS, SCHUYLER V       Street Address (P.O. Box Number is Not Acceptable)       Street Address (P.O. Box Number is Not Acceptable)         SUITE 3       SANTA ROSA BCH FL 32459       City       FL       Zip Code         8. The above named entity submits this statement for the purpose of changing its registered agent.       49.30.03       Yei State         SIGNATURE       Supatiant, typed       privation and state of Florida. I am familiar with, and the obligations of registered agent.       UNTE: Registered Agent signature register when releasting)       Date         FILE NOW!!!       FEE \$150.00       After May 1, 2003 Fee will be \$550.00       State       Steel Contribution.       Added to I Inter Trust Fund Contribution.       Added to I Inter Trust Fund Contribution.       Added to I Inter Inter Address I Inter Addet I Inter Inter Interseare Addet I Inter Inter Addet I I Inter Inter Inte	pplicable
Zip       Country       Zip       Country       S. Certificate of Status Desired       \$8.75 Addition Fee Required         6. Name and Address of Current Registered Agent       7. Name and Address of New Registered Agent       \$8.75 Addition Fee Required         WOODS, SCHUYLER V #21 S. ANCHOR LAKE DR SUITE 3 SANTA ROSA BCH FL 32459       Name       Street Address (P.O. Box Number is Not Acceptable)         City       FL       Zip Code         8. The above named enlity submits this statement for the purpose of changing its registered agent.       Gity       FL         SIGNATURE       Signature, speed printed name of registered agent and take if applicable.       (NOTE: Registered Agent signature registered agent.       DATE         FILE NOW!!!       FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State       11.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS       Added to I         10.       OFFICERS AND DIRECTORS       11.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN THE MARKE STO OFFICERS AND DIRECTORS IN THE MARKE STREET ADDRESS CITY-\$1-ZP       City STLE       City StLEW	pplicable
Zip       Country       Zip       Country       S. Certificate of Status Desired       \$8.75 Addition Fee Required         6. Name and Address of Current Registered Agent       7. Name and Address of New Registered Agent       Name         WOODS, SCHUYLER V #21 S. ANCHOR LAKE DR SUITE 3       Street Address (P.O. Box Number is Not Acceptable)       Street Address (P.O. Box Number is Not Acceptable)         SuiTE 3       SANTA ROSA BCH FL 32459       City       FL       Zip Code         3. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and the obligations of registered agent.       H: 30.0 Z         SIGNATURE       Signature, type of printed name of registered agent and late if applicable       (NOTE: Registered Agent signature required when reinstaing)       Date         FILE NOW!!!       FEE IS \$150.00       Added to I       Added to I         Added to Florida Department of State       Inte       Street Address TO OFFICERS AND DIRECTORS       Added to I         INE       OFFICERS AND DIRECTORS       11.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN Mee       Citage         WW       OFFICERS AND DIRECTORS       11.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN Mee       Citage         WW       Year 1. S. ANCHORS LAKE DRIVE       Delete       NME       SHEET ADDRESS       C	
6. Name and Address of Current Registered Agent       7. Name and Address of New Registered Agent         WOODS, SCHUYLER V       Name         #21 S. ANCHOR LAKE DR       Street Address (P.O. Box Number is Not Acceptable)         SUITE 3       SANTA ROSA BCH FL 32459         City       FL         Zip Code       City         B. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and the obligations of registered agent.         SIGNATURE       Signature. spead printed name of registered agent and life I applicable.         SIGNATURE       Street Now 111 FEE IS \$150.00         After May 1, 2003 Fee will be \$550.00       Make Check Payable to Florida Department of State         0.       OFFICERS AND DIRECTORS       11.         ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS       11.         ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS       11.         AMME       Detele       TINE         WOODS, SCHUYLER       ID Detele       TINE         WOODS, SCHUYLER       STREET ADDRESS       CITY-\$1-ZIP	
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Signature, typed_printed name of registered agent and tale if applicable.       (NOTE: Registered Agent signature required when reinstating)       DATE         FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 lake Check Payable to Florida Department of State       9. Election Campaign Financing Trust Fund Contribution.       \$5.00 M Added to I         0.       OFFICERS AND DIRECTORS       11.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN ITILE         0.       OFFICERS AND DIRECTORS       11.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN Change         0.       OFFICERS AND DIRECTORS       11.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN Change         0.       OFFICERS AND DIRECTORS       11.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN Change         0.       WOODS, SCHUYLER       Delete       TITLE         WME       WOODS, SCHUYLER       STREET ADDRESS SANTA ROSE BEACH FL 32459       STREET ADDRESS CITY-ST-ZIP	
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