DOCUMENT # P97000078564					FILED			
1. Entity Name  FREEDOM MOBILITY, INC.					\$ I have been			
I NELDOM MODILITY, INC.					00 MAR 16 PM 2:55			
Principal Plac	ce of Business	Mailing Address			SECRETARY OF STATALLAHASSEE, FLORI	TE.		
RED BANI	K EXPRESSWAY I 45227	4788 RED BANK EXPRESSWA CINCINNATI OH 45227-1520	ĄΥ	Z	TALLAHASSEE, FLOHI	IDA		
2. Principal F	Place of Business Box 5602	3. Mailing Address P.O. Box	5602					
Suite, Apt		Suite, Apt. #, etc. Talla hass		-	DO NOT WRITE IN TH	HIS SPACE		
City & Star	lahassee FL	City & State		4.	FEI Number 59-3469002		Applied For Not Applicable	
323.		32314	Country USA	5.	Certificate of Status Desired	<b>\$8.75</b> Fee Re	Additional quired	
	6. Name and Address of Current	Registered Agent	Name		Name and Address of New Register	ed Agent		
HOF	FMAN, RALPH			Marc	Rev Number is Not Acceptable)		.0.1	
1122	S. MAGNOLIA DRIVE	Street Address		2415	Box Number is Not Acceptable)	tine i	Kd	
IALL	AHASSEE FL 32301			<u> </u>				
			City		7143300	FL   Zip	Code 32301_	
8. The above	e named entity submits this statement for	or the purpose of changing its r	egistered office or	registered ag	ent, or both, in the State of Florida.			
				=				
SIGNATURE	Marc Kompl. Signature, typed or printed name of pastered agent	Marc Kemp and title if applicable (NOTE:	Registered Agent signat					
9. This corp	Mark Komen Signature, typed or printed name of Mistered agent oration is eligible to satisfy its Intangible requirement and elects to do so.		! FEE IS \$150.0 10 Fee will be \$5	ure required when re		TE	\$5.00 May Be Added to Fees	
9. This corp	oration is eligible to satisfy its Intangible requirement and elects to do so.  oria on back)  OFFICERS AND	FILE NOW!! After MAY 1, 200 Make Check Payabl	! FEE IS \$150.0 10 Fee will be \$5	ure required when re 00 550.00 t of State	2 - / -  einstating)  DA  10. Election Campaign Financing	AND DIREC	Added to Fees	
9. This corp Tax filing (See crite 11. TITLE NAME	oration is eligible to satisfy its Intangible requirement and elects to do so.  OFFICERS AND  P  KEMP, MARC	FILE NOW!! After MAY 1, 200 Make Check Payabl	! FEE IS \$150.00 Fee will be \$5 e to Departmen	oure required when recommended to the state of State	2 - / -  Peinstating)  10. Election Campaign Financing Trust Fund Contribution.  DITIONS/CHANGES TO OFFICERS	STE S	Added to Fees	
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9. This corp Tax filing (See crite  11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	oration is eligible to satisfy its Intangible requirement and elects to do so.  OFFICERS AND  P  KEMP, MARC	FILE NOW!! After MAY 1, 200 Make Check Payable	! FEE IS \$150.I IO Fee will be \$5 e to Departmen  12. ITILE NAME STREET ADDRESS CITY-SI-ZIP TITLE	oure required when recommended to the state of S	2-/- einstating)  10. Election Campaign Financing Trust Fund Contribution.  DDITIONS/CHANGES TO OFFICERS  Kemp x 5602 a ssee, FL 32314	AND DIRECTOR	Added to Fees  TORS IN 11  ange Addition  Addition	
9. This corp Tax filing (See crite  11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP	oration is eligible to satisfy its Intangible requirement and elects to do so.  OFFICERS AND  P  KEMP, MARC  P.O. BOX 9419	After MAY 1, 200 Make Check Payable DIRECTORS  Delete	! FEE IS \$150.I IO Fee will be \$5 e to Departmen  12. ITITLE NAME STREET ADDRESS CITY-ST-ZIP	oure required when recommended to the state of S	2-/- einstating)  10. Election Campaign Financing Trust Fund Contribution.  DDITIONS/CHANGES TO OFFICERS.  Remp x 5602 10 55ee, FL 323/4  200003220  -04/11/00-	AND DIRECT Characters of the C	Added to Fees  TORS IN 11  ange Addition  ange Addition	
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13. 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 report or supplemental 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 Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

marc Kemp Marc Kemp

2-1-2000

850-322-7450

Daytime Phor