Principal Place of Business Mailing Address 3205 8TH AVE. 3205 8TH AVE. TAMPA FL 33605 TAMPA FL 33605 2. Principal Place of Business 2615 E. 75 Ave. Suite, Apt. #, etc. Suite, Apt. #, etc. City & State Tampa fL Tampa fL Suite, Apt. #, etc. City & State Country Zip Country 33605 USA Street Address of Current Registered Agent F. Name and Address of Current Registered Agent TAMPA FL 33605 City & State Tam /PA TAMPA FL 33605 USA Street Address of New Registered Agent Name LARSON, CHRISTOPHER J 32605 Street Address (P.O. Box Number is Not Acceptable)	3205 8TH AVE TAMPA FL 53055 3. Mailing Address ZGIS E. 779 Avc. Suite, Apt. #, etc. Do NOT WRITE IN THIS SPACE City & State Tomppa B City & FL Street Address (P.O. Box Number is Not Acceptable) City & FL City & FL Street Address (P.O. Box Number is Not Acceptable) City & FL City & FL Street Address (P.O. Box Number is Not Acceptable) City & FL City & FL Street Address (P.O. Box Number is Not Acceptable) City & FL City & FL City & FL Street Address (P.O. Box Number is Not Acceptable) City & FL City & FL City & FL Street Address City Street Address City S		1. Entity Name	022811			eb 14, Secreta	ary o	f St	ate atte
2055 BTH AVE. 3205 BTH AVE. AMPA FL 33005 IMPA RL 33005 2. Principal Place of Business 2/0.5 E. TPS Ave. Sum, Act. # me. Sum, Apl. #, etc. Cry, & State Sum, Apl. #, etc. Cry, & State Contry 2. Principal Place of Business Contry Sum, Act. # me. Sum, Apl. #, etc. Cry, & State Contry 2. Do NOT WRITE IN THIS SPACE Do NOT WRITE IN THIS SPACE Cry, & State Contry 326,05 Contry 2. Do Not write IN THIS SPACE State Address of Current Registered Agent 8. The above named antipulations of Current Registered Agent Name 1. Arran and Address of Current Registered Agent Name 2. The above named antipulations tak-statement for the purpose of changing its registered agent, or both, in the State of Fords. Street Address (P.O. Bax Number is Not Acceptable) 3005 BTH AVE And Ar May P. 33005 4. The above named antipulation tak-statement for the purpose of changing its registered agent, or both, in the State of Fords. 5. Control on back Control on back 9. This corporation is clighte to assist at statement for the purpose of changing its registered agent, or both, in the	3205 BTH AVE TAMPA R. 33025 3. Mailing Address 2. Mailing Address 2. Mailing Address Suile, Ap. I., etc. DO NOT WRITE IN THIS SPACE Cly & State Tampa 2.0 Cly & State Tampa Country 2.0 Cly & State Tampa Country 2.0 Country 3.3605 U.S.A Outer Applied Form Name Street Address (P.O. Box Number is Not Acceptable) Cly Cly Cly Code Water Registered Agent Nome Street Address (P.O. Box Number is Not Acceptable) Cly Cly Cly Code Water Registered Agent layeaux manade were resulter) Date Only FILE NOW!!! FEE IS \$150.00 After May 1, 2002 Fee will be \$550.00 After May 1, 2002 Fee will be \$550.00 After May 1, 2002 Fee will be \$550.00 SAND DIFECTORS 2.	S BTH ARE (PA FL 3305) 205 STM AVE LANPA RL 305(5) 205 STM AVE LANPA RL 305(5) Ave Prociosi Please of Eductives 2LLIS E. 779 Ave 3. Mailing Address 2LLIS E. 779 Ave <th>ASMASTERS, INC.</th> <th></th> <th></th> <th></th> <th>02-14-2002</th> <th>90037 029</th> <th>9 ***150</th> <th>0.00</th>	ASMASTERS, INC.				02-14-2002	90037 029	9 ***150	0.00
AMPA FL 33005 TAMPA FL 33005 2. Principal Place of Business Suite, Apt. #. rite 2. Mailing Address Suite, Apt. #. rite DO NOT WRITE IN THIS SPACE Chy & State TQ m (Aa 3 2005 Country Class to TQ m (Aa 3 2005 Country TQ m (Aa TQ m (Aa TQ m (Aa TQ m (Aa TQ m (Aa 3 2005 Country TQ m (Aa TQ m (Aa) TQ m (Aa TQ m (Aa) TQ m (Aa TQ m (Aa) TQ m (Aa TQ m (Aa) TQ m (Aa) TQ m (Aa) TQ m (Aa) TQ m (Aa TQ m (Aa) TQ m (A	Image: Address Image: Address Image: Address Image: Add	IFA R 13665 TAMPA R 33655 Principal Place of Budiness Zoll S E . 779 Avc . Sole, Apr. R, etc. Sole, Apr. R, etc. On NOT WRITE IN THIS SPACE O NOT WRITE IN THIS SPACE City & Stills Country Zig & Still, DA Country Zig & Still, All Name and Address of Number is Not Acceptable ARSON, CHRISTOPHER J Still, Advin the Still, Still, Country of the Still of One or registered office or registered agent, or both, in the Stell of Force The store named angle alteria to stall attract for the purpose of changing is registered office or registered agent, or both, in the Stell of Force is NUT Registered Agent to registered agent, or both, in the Stell of Force is NUT Registered Agent to registered office or registered agent, or both, in the Stell of Force is NUT Registered Agent to regeteeee with the St	Principal Place of Business	Mailing Address						
2. million registered agent, or both, in the State of Forda. 3. Country 3. C	Amang Address Suite, Apt. #. etc. DO NOT WRITE IN THIS SPACE City & State TOmpA Guntry Sole City & State Country Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code City Ci									
	Amang Address Suite, Apt. #. etc. DO NOT WRITE IN THIS SPACE City & State Tampa Country 33605 USA Country Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code City									
Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE COV: 8: State Clipt & State Image: Clipt & State Image: Clipt & State Image: Clipt & State TO MPA Current Country Zip Country State State 32605 Current Country Zip Country State State 32605 Current Country Zip State State State 6: Name and Address of Current Registered Agent Name Name State Address of New Registered Agent LARSON, CHRISTOPHER J State State Address of New Registered Agent Name State Address of P.O. Box Number is Not Acceptable) State Address of New Registered Agent Name State Address of P.O. Box Number is Not Acceptable) State Address of P.O. Box Number is Not Acceptable) State Address of P.O. Box Number is Not Acceptable) 305 City FL Zip Coc City FL Zip Coc Name State Address of P.O. Box Number is Not Acceptable) Dete Note Registered Agent agents registered agent, or both, in the State of Florida. Note Registered Agent agents registered Agent agents registered agent, or both, in the State of Florida. Note Registered Agent agents reg	Suile, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 1. FEI Number 59-3496580 Applied For Not Applicable Zip Country 5. Certificate of Status Desired \$8,75 Additional Fee Required Junce Name Name Urrent Registered Agent 7. Name and Address of New Registered Agent 7 Name Street Address (P.O. Box Number is Not Acceptable)	Suite. Act. #. etc. Suite. Act. #. etc. DD NOT WRITE IN THIS SPACE City & State Tam PA Applied For Tam PA B City & State Tam PA City & State City & State Data Applied For Tam PA Applied For Tam PA City & State Data Applied For Tam PA City & State City & City & FL Applied For Tam PA City & City & City & City City & FL Applied For Tam PA City & City & FL Applied For Tam PA City & City & FL City & City City & FL Zio Code The above named and partial data City & FL Zio Code City & FL Zio Code The above named and partial data File Howith PEELS 510.00 After May 1, 2002 For Mill be 550.00 Make Check Payable to Department of State In Election Campa ph Financing Make Check Payable to Department of State Diff Check Compa ph Financing Make Check Payable to Department of State In Election Campa ph Financing Make Check Payable to Department of State City & Cit		3. Mailing Address	rith Aug					
Tam (A Famp A Famp A S9-34495580 Intel S9-3495580 Zip 32,005 USA S. Centificate of Status Desired \$8.75 ad 56 and 56 an	Tampa S93496580 Not Applicable Zip Country S. Certificate of Status Desired \$8.75 Additional Fee Required 33605 USA S. Certificate of Status Desired \$8.75 Additional Fee Required urrent Registered Agent Y. Name and Address of New Registered Agent Y. Name Street Address (P.O. Box Number is Not Acceptable) Y. City FL Zip Code City FL Steet Address (P.O. Box Number is Not Acceptable) City FL Zip Code City FL Zip Code City FL Steet Address (P.O. Box Number is Not Acceptable) Date Title Not Applicable Make Check Payable to Department of State Int E SAND DIRECTORS 12 Addition Oblete Title Not Applicable Note Street A	Tom (A FL Tom PA Country Source Monthal Country Monthal Country </td <td></td> <td></td> <td>12 AVE.</td> <td>-</td> <td>DO NOT WRIT</td> <td>E IN THIS SP</td> <td>ACE</td> <td></td>			12 AVE.	-	DO NOT WRIT	E IN THIS SP	ACE	
Zip 33(605) Country USA Zip 33(605) Country USA 5. Certificate of Status Desired \$8,75 ad 5eo Require is Name and Address of New Registered Agent 8. The mome and Address of Current Registered Agent Name and Address of New Registered Agent Net New Registered Agent diputter reset Net New Registered Agent Net New Registered Agent diputter reset Net New Registe	Zip 33.60 S Country USA 5. Certificate of Status Desired \$8.75 Additional Fee Required urrent Registered Agent Name Name Name Name Street Address of New Registered Agent Y Name Street Address of New Registered Agent Y City FL Zip Code City FL Street Address (P.O. Box Number is Not Acceptable) Other Propose of changing its registered office or registered agent, or both, in the State of Florda. Y=2<-02	Zip Country Zip Country S. Contribution S. Contribution S. S. Astantional 33.6005 Country Name and Address of New Registered Agent Name and Address of New Registered Agent Name ARSON, CHRISTOPHER J Name Name Name and Address of New Registered Agent Name ARSON, CHRISTOPHER J City FL Zip Code 200 STH AVE. City FL Zip Code 7. The above named entry submits the statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Nome 0MUTUP Social State Mark 1, 2002 Fee Will be S550.00 Make Check Payable to Department of State No. Election Compage Flancing Trust Fund Countribution. S5.00 May Be Address F 10. Election Compage Flancing S5.00 May Be Address F Name Note S5.00 May Be Address F 11. Election Compage Flancing Deficers And DirecToms 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Name Change Address 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 State May 1, 2022 Fee Will Be S55.00 Make Check Payable to Department of State In the Mark In the Mark 13. Address State Address Stit AVE Officers AND DirecToms In the Mark In the Mark In the Mark <t< td=""><td>City & State</td><td></td><td>G</td><td>4. FEI Number</td><td>59-3496580</td><td></td><td></td><td>·</td></t<>	City & State		G	4. FEI Number	59-3496580			·
B: Name and Address of Current Registered Agent ARSON, CHRISTOPHER J 205 8TH AVE. AMPA FL 33605 City FL Zip Coc City FL Coc Zip City Site TAVE. City Site TAVE. Contraster Contrage Contraster Contraster Contraster Contraste	Internet Registered Agent Name Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code Data Date Date Date After May 1, 2002 Fee will be \$55.00 Name 10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees S AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Delete True Change Addition NAME STRET ADDRESS City-st-zip Change Addition Delete	6: Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent 7. In Name and Address of New Registered Agent ARSON, CHRISTOPHER J 205 5TH AVE. ANPA FL 33805 Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code The above named entry submits that statument for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Image: City in the State of Florida. Given trained for provide for the Transition of	Zip Country	Zip	Country	5. Certificate o	f Status Desired		8.75 Add	ditional
ARSON, CHRISTOPHER J \$205 8TH AVE. TAMPA FL 33605	Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code City FL Zip Code City FL Zip Code City FL City FL Zip Code City FL	ARSON, CHRISTOPHER J 205 8TH AVE. AMPA FL 33005 : The above named entry submat bits statement for the purpose of changing its registered affect or registered agent, or both, in the State of Florida. City FL Zio Code City FL Zio Code City SL 20 Code Ci			· ···=	7. Name and A	ddress of New Re			
3205 8TH AVE. City FL Zip Coc * City FL Zip Coc * The above named entry-automits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. ************************************	City FL Zip Code Deant for the purpose of changing its registered office or registered agent, or both, in the State of Florida.	2005 6TH AVE. AMPA FL 33605 City FL Zip Code City FL	Arson, Christopher J				is Not Accentable	<u>،</u>		
City FL Zio Coc 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. \cdot 20_{		City City <thcity< th=""> City City <thc< td=""><td></td><td></td><td></td><td>(F.O. DOX NUMBER</td><td></td><td>,</td><td></td><td></td></thc<></thcity<>				(F.O. DOX NUMBER		,		
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. 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. The above named entity, submits this statement for the purpose of changing its registered Agent signature registered agent, or both, in the State of Florida. The above named entity, submits this statement for the purpose of changing its registered Agent signature registered agent, or both, in the State of Florida. The comportation is eligible to satisfy its Intangibb This comporation is eligible to satisfy its Intangibb The comporation is eligible to assist the statement of the tagentere Agent signature registered office or registered agent, or both, in the State of Florida. The comporation is eligible to satisfy its Intangibb The comporation is eligible to satisfy its Intangibb The comporation is eligible to assist the tagentered (NOTE Registered Agent signature registered agent, or both, in the State The comporation is eligible to satisfy its Intangibb The comporation is eligible to assist the tagentered (AFSON, CHRISTOPHER J (Change The comporation is eligible to the component of		f Image: the above named entiple up a statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Image: the statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. GNATURI Sequetes the statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Image: the statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. GNATURI Sequetes the statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Image: the statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. GNATURI Sequetes the statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Image: the statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. GNATURI Check Payable to Department of State Image: the statement for the purpose of change is the statement of the statement of state Image: the statement for the purpose of change is the statement of state It is comparison to eligible to asity its Intanging FILE NOW!!! FEE Image: the statement of state It is comparison to eligible to asity its Intanging FILE NOW!!! FEE Image: the statement of state It is comparison to eligible to asity its Intanging FILE NOW!!! Image: the statement of state	AMPA FL 33605		City			С	Zip Cod	e
IGNATURE Syname, Report Typere Provide and and the Flapecon. (NOTE: Registered Agent algreuse required when reinistating) A. This corporation is eligible to satisfy its Intanglice Tax filing requirement and elects to do so. (See criteria on back) After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of State 10. Election Campaign Financing Trust Fund Contribution. Adde Adde Action After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of State 10. Election Campaign Financing Trust Fund Contribution. Adde Action		GRATURE Sequence loader for the concerned agent and this fublicity Tax filling requirement and elects to do so. (Gee origina on back) Concerned agent and this fublicity Tax filling requirement and elects to do so. (Gee origina on back) Concerned agent and this fublicity Concerned agent and this fublicity Tax filling requirement and elects to do so. (Gee origina on back) Concerned agent and this fublicity Concerned agent and this fublicity Concerned agent and this fublicity Concerned agent and the concerned agent and this fublicity Concerned agent and the concerned agent and the concerned agent agent agent agent Concerned agent and this fublicity Concerned agent and the concerned agent age	The above named entity submits this statement for	the purpose of changing its		red agent or both	in the State of Flor			
CSINTON Speakade, 1920 or parties fails (MOTE Registered Agent signature required when reinstating) DATE D. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of State 10. Election Campaign Financing Trust Fund Contribution. \$5.1 Adde 1. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOFF 10. Election Campaign Financing Trust Fund Contribution. \$5.1 Adde 1. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOFF 12. 1. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOFF Change 1. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOFF Change NME ARSON, CHRISTOPHER J Delete NAME STRET ADDRESS CITY-ST-2IP TRE Delete TITLE NAME Change Change Net ADDRESS \$205 8TH AVE. Delete TITLE Change Change Net ADDRESS \$205 8TH AVE. Delete TITLE Change Change Net ADDRESS \$205 8TH AVE. Delete TITLE Change Change	evid gent and THE TEpuleties (MOTE: Registered Agent signature required when reinstating) DATE anglibite FILE NOW!!! FEE IS \$150.00 After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of State 10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees S AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Delete TITLE NAME Change Addition S END DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Delete TITLE Change Addition NAME STREET ADDRESS CITY-ST-ZIP Change Addition Delete TITLE Change Addition NAME STREET ADDRESS CITY-ST-ZIP Change Addition Delete TITLE Change Addition NAME STREET ADDRESS CITY-ST-ZIP Change Addition Delete TITLE Change Addition NAME STREET ADDRESS CITY-ST-ZIP Change Addition Delete TITLE NAME Change Addition NAME STREET ADDRESS CITY-ST-ZIP Change Addition	Syndram (byster primes and and and life Tracketone (NOTE Registered Agene depression required when revealating) DATE This comporation is eligible to satisfy its intanglob Tax filing requirement and elects to do so. FILE NOW!!! FEE IS \$150.00 After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of State 10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees . OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 LE D Immediate to the state of			registered office of regis	rea agent, or boar		_		
Tax filing requirement and elects to do so. (See criteria on back) After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of State 10. Election Campaign Financing Trust Fund Contribution. \$5.0 Adde 1. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR International contribution. Change Inter ADDRESS 205 8TH AVE. TY-S1-2IP Delete TITLE Change Change MME MARA FL 33605 Delete TITLE Change MARE VINTER, FRANK Delete TITLE Change MARE VINTER, FRANK Change Change MARE TITLE Change Change MARE TITLE Change Change MARE Delete TITLE Change MARE TITLE Change Change MARE STREET ADDRESS CITY-ST-ZIP Change MARE Delete	After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of State 10. Election Campaign Financing Trust Fund Contribution. \$5,00 May Be Added to Fees S AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Delete TITLE Change Addition NAME STREET ADDRESS CITY-ST-2IP Change Addition Delete TITLE Change Addition NAME STREET ADDRESS CITY-ST-2IP Change Addition Delete TITLE Change Addition NAME STREET ADDRESS CITY-ST-2IP Change Addition Delete TITLE Change Addition NAME STREET ADDRESS CITY-ST-2IP Change Addition Delete TITLE Change Addition NAME STREET ADDRESS CITY-ST-2IP Change Addition Delete TITLE Change Addition NAME STREET ADDRESS CITY-ST-2IP Change Addition Delete TITLE Change Addition NAME STREET ADDRESS CITY-ST-2IP Change Addition Delete TITLE Change Addition NAME STREET ADDRESS CITY-ST-2IP Change Addition <td< th=""><th>Tax filing requirement and elects to do so. (Gee criteria on back) After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of State 10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees . OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 . Defice ITLE Addition Change Addition WRE ARSON, CHRISTOPHER J ITLE ITLE Addition VFS1-2P TAMPA FL 33605 CITY-S1-2P Change Addition WRE Delete TTLE ITLE Addition Y-S1-2P TAMPA FL 33605 CITY-S1-2P ITLE Addition WRE Delete TTLE ITLE Addition Y-S1-2P TAMPA FL 33605 CITY-S1-2P ITLE ItLE Y-S1-2P TAMPA FL 33605 CITY-S1-2P ITLE ItLE ItLE ItLe Y-S1-2P TAMPA FL 33605 CITY-S1-2P CHange ItLE ItLE</th><th>IGNATURI Signature, typed or primted name of registered agent ar</th><th>d title if applicable. (NOT</th><th>E: Registered Agent signature requ</th><th>d when reinstating)</th><th>\</th><th>U</th><th>ک</th><th></th></td<>	Tax filing requirement and elects to do so. (Gee criteria on back) After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of State 10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees . OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 . Defice ITLE Addition Change Addition WRE ARSON, CHRISTOPHER J ITLE ITLE Addition VFS1-2P TAMPA FL 33605 CITY-S1-2P Change Addition WRE Delete TTLE ITLE Addition Y-S1-2P TAMPA FL 33605 CITY-S1-2P ITLE Addition WRE Delete TTLE ITLE Addition Y-S1-2P TAMPA FL 33605 CITY-S1-2P ITLE ItLE Y-S1-2P TAMPA FL 33605 CITY-S1-2P ITLE ItLE ItLE ItLe Y-S1-2P TAMPA FL 33605 CITY-S1-2P CHange ItLE	IGNATURI Signature, typed or primted name of registered agent ar	d title if applicable. (NOT	E: Registered Agent signature requ	d when reinstating)	\	U	ک	
1 ax Timing requirement and elects to do so. (See criteria on back) After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of State Trust Fund Contribution. Adde 1. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR Image 1000000000000000000000000000000000000	After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of State Trust Fund Contribution. Added to Fees S AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 I Delete TTLE ITLE NAME STREET ADDRESS CITY-ST-2IP I Delete TTLE Addition NAME STREET ADDRESS CITY-ST-2IP I Delete TTLE Change Addition NAME STREET ADDRESS CITY-ST-2IP Change Addition I Delete TTLE Change Addition NAME STREET ADDRESS CITY-ST-2IP Change Addition I Delete<	Tax Ting requirement and elects to do so. After May 1, 2002 Pee will be \$350.00 Trust Fund Contribution. Added to Fees (See criteria on back) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 LE Delete TITLE Delete TITLE Change Added to Fees WE AMPA FL 33605 ITLE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Change Added to Fees V:S1-2P TAMPA FL 33605 ITLE NAME ITLE Change Addition WE WINTER, FRANK Delete TITLE ITLE Added to Fees Addition V:S1-2P TAMPA FL 33605 ITLE ITLE Added to Fees Addition WE WINTER, FRANK Delete TITLE Change Addition V:S1-2P TAMPA FL 33605 ITTLE Change Addition V:S1-2P TAMPA FL 33605 ITTLE Change Addition V:S1-2P Delete TITLE Change Addition V:S1-2P ITTLE ITTLE Change Addition V:S1-2P ITTLE ITTLE ITTLE <td></td> <td></td> <td></td> <td>10. Elec</td> <td>tion Campaign Fina</td> <td>ancing</td> <td>\$5.0</td> <td></td>				10. Elec	tion Campaign Fina	ancing	\$5.0	
ITLE D Change AME CARSON, CHRISTOPHER J TREET ADDRESS 2205 8TH AVE. TYV-ST-2IP TLE D Change AME VINTER, FRANK TREET ADDRESS 2205 8TH AVE. TVY-ST-2IP TLE AMPA FL 33605 TUY-ST-2IP TLE AMPA FL 33605 TUY-ST-2IP TLE CARDRESS TVY-ST-2IP TLE CARDRES TTY	Delete TITLE Change Addition NAME STREET ADDRESS CITY-ST-ZIP Addition Delete TITLE Change Addition NAME STREET ADDRESS CITY-ST-ZIP Addition Delete TITLE Addition Addition NAME STREET ADDRESS CITY-ST-ZIP Addition Delete TITLE Addition Addition NAME STREET ADDRESS CITY-ST-ZIP Addition Delete TITLE Addition Addition NAME STREET ADDRESS CITY-ST-ZIP Addition Delete TITLE Change Addition NAME STREET ADDRESS CITY-ST-ZIP Addition Objecte TITLE Change Addition NAME STREET ADDRESS CITY-ST-ZIP Addition Objecte TITLE Change Addition NAME STREET ADDRESS CITY-ST-ZIP Addition Objecte TITLE Change Addition NAME STREET ADDRESS CITY-ST-ZIP <	LE Delete TITLE MAME Change Addition WEET ADDRESS 205 8TH AVE. STREET ADDRESS CITY-ST-ZIP Change Addition V-S1-2P TAMPA FL 33605 Delete TITLE MAME Change Addition WEET ADDRESS 205 8TH AVE. Delete TITLE MAME Change Addition WEET ADDRESS 205 8TH AVE. STREET ADDRESS CITY-ST-ZIP Change Addition V-S1-2IP TAMPA FL 33605 Delete TITLE MAME STREET ADDRESS CITY-ST-ZIP Change Addition V-S1-2IP TAMPA FL 33605 Delete TITLE MAME STREET ADDRESS CITY-ST-ZIP Change Addition WE Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP Addition WE Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP				Trus				
Image: Carson, CHRISTOPHER J Name IREET ADDRESS \$205 8TH AVE. TY-S1-ZIP TAMPA FL 33605 ILE D ILE D VINTER, FRANK Delete TY-S1-ZIP TITLE AMPA FL 33605 CITY-ST-ZIP ILE Change MARE STREET ADDRESS 205 8TH AVE. STREET ADDRESS 205 8TH AVE. STREET ADDRESS 205 8TH AVE. STREET ADDRESS 11 Street ADDRESS CITY-ST-ZIP ILE Delete TITLE ILE Delete TITLE ILE Delete TITLE ILE CITY-ST-ZIP Change NAME STREET ADDRESS CITY-ST-ZIP ILE Delete TITLE ILE Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP ILE Delete TITLE NA	NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS	ME ARSON, CHRISTOPHER J NAME V-ST-2P AMPA FL 33605 CITY-ST-2P V-ST-2P Delete TILE Me VINTER, FRANK STREET ADDRESS S205 8TH AVE. Delete TILE V-ST-2P TAMPA FL 33605 CITY-ST-2P V-ST-2P Delete TILE WE Delete TILE NAME STREET ADDRESS V-ST-2P CITY-ST	1. OFFICERS AND C	JIRECTORS	12.	ADDITIONS/C	HANGES TO OFFI			S IN 11
REET ADDRESS \$205 &TH AVE. TY-ST-ZIP AMPA FL 33605 CITY-ST-ZIP Change ME VINTER, FRANK REET ADDRESS \$205 &TH AVE. TY-ST-ZIP AMPA FL 33605 CITY-ST-ZIP LE Delete TITLE CADRESS PY-ST-ZIP CITY-ST-ZIP LE Delete CITY-ST-ZIP LE Delete CITY-ST-ZIP LE Delete CITY-ST-ZIP LE CADRESS CITY-ST-ZIP LE Delete CITY-ST-ZIP LE CADRESS CITY-ST-ZIP LE Delete CITY-ST-ZIP LE CADRESS CITY-ST-ZIP	CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete <td>REET ADDRESS STREET ADDRESS Y-ST-ZIP AMPA FL 33605 LE O WINTER, FRANK Delete WINTER, FRANK STREET ADDRESS SZO5 8TH AVE. STREET ADDRESS Y-ST-ZIP AMPA FL 33605 LE O WINTER, FRANK STREET ADDRESS SZO5 8TH AVE. STREET ADDRESS Y-ST-ZIP AMPA FL 33605 LE O Delete TTLE NAME STREET ADDRESS STREET ADDRESS Y-ST-ZIP AMPA FL 33605 LE O Delete TTLE NAME STREET ADDRESS STREET ADDRESS Y-ST-ZIP Change Addition NAME STREET ADDRESS STREET ADDRESS Y-ST-ZIP Change V-ST-ZIP Change V-ST-ZIP TTLE NAME STREET ADDRESS Y-ST-ZIP Change V-ST-ZIP Change V-ST-ZIP Change V-ST-ZIP Change NAME STREET ADDRES</td> <td>T</td> <td>Delete</td> <td></td> <td></td> <td></td> <td>Ľ</td> <td>Change</td> <td>Addition</td>	REET ADDRESS STREET ADDRESS Y-ST-ZIP AMPA FL 33605 LE O WINTER, FRANK Delete WINTER, FRANK STREET ADDRESS SZO5 8TH AVE. STREET ADDRESS Y-ST-ZIP AMPA FL 33605 LE O WINTER, FRANK STREET ADDRESS SZO5 8TH AVE. STREET ADDRESS Y-ST-ZIP AMPA FL 33605 LE O Delete TTLE NAME STREET ADDRESS STREET ADDRESS Y-ST-ZIP AMPA FL 33605 LE O Delete TTLE NAME STREET ADDRESS STREET ADDRESS Y-ST-ZIP Change Addition NAME STREET ADDRESS STREET ADDRESS Y-ST-ZIP Change V-ST-ZIP Change V-ST-ZIP TTLE NAME STREET ADDRESS Y-ST-ZIP Change V-ST-ZIP Change V-ST-ZIP Change V-ST-ZIP Change NAME STREET ADDRES	T	Delete				Ľ	Change	Addition
LE D Change MAE MAE MAE MAE MAE MAE VINTER, FRANK REET ADDRESS 2205 8TH AVE. AMPA FL 33805	Delete TITLE Change Addition NAME STREET ADDRESS CITY-ST-ZIP Change Addition Delete TITLE Change Addition NAME STREET ADDRESS CITY-ST-ZIP Change Addition Delete TITLE NAME Addition Addition NAME STREET ADDRESS CITY-ST-ZIP Addition Delete TITLE Change Addition NAME STREET ADDRESS CITY-ST-ZIP Change Addition Delete TITLE Change Addition NAME STREET ADDRESS CITY-ST-ZIP Change Addition Delete TITLE Change Addition NAME STREET ADDRESS CITY-ST-ZIP Change Addition Delete TITLE NAME Change Addition NAME STREET ADDRESS CITY-ST-ZIP Change Addition Oelete TITLE NAME Change Addition NAME STREET ADDRESS CITY-ST-ZIP NADE Change <t< td=""><td>LE Delete TITLE NAME STREET ADDRESS 205 8TH AVE. AMPA FL 33605 CITY-ST-ZIP AMPA FL 33605 CITY-ST-ZIP Change Addition ME KET ADDRESS V-ST-ZIP CIE ME KET ADDRESS V-ST-ZIP CIE ME KET ADDRESS V-ST-ZIP CIE Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP CIE ME KET ADDRESS V-ST-ZIP CIE Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP CIE CIE Delete TITLE NAME STREET ADDRESS V-ST-ZIP CIE CIE Delete TITLE NAME STREET ADDRESS V-ST-ZIP CIE CIE STREET ADDRESS CITY-ST-ZIP CIE NAME STREET ADDRESS CITY-ST-ZIP CIE CIE STREET ADDRESS CITY-ST-ZIP CIE CIE CIE CIE CIE CIE CIE CIE CIE CIE</td><td>REET ADDRESS \$205 8TH AVE.</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></t<>	LE Delete TITLE NAME STREET ADDRESS 205 8TH AVE. AMPA FL 33605 CITY-ST-ZIP AMPA FL 33605 CITY-ST-ZIP Change Addition ME KET ADDRESS V-ST-ZIP CIE ME KET ADDRESS V-ST-ZIP CIE ME KET ADDRESS V-ST-ZIP CIE Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP CIE ME KET ADDRESS V-ST-ZIP CIE Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP CIE CIE Delete TITLE NAME STREET ADDRESS V-ST-ZIP CIE CIE Delete TITLE NAME STREET ADDRESS V-ST-ZIP CIE CIE STREET ADDRESS CITY-ST-ZIP CIE NAME STREET ADDRESS CITY-ST-ZIP CIE CIE STREET ADDRESS CITY-ST-ZIP CIE	REET ADDRESS \$205 8TH AVE.							
ME REET ADDRESS 3205 8TH AVE. AMPA FL 33605 TLE ME REET ADDRESS TY-ST-ZIP TLE ME REET ADDRESS TY-ST-ZIP TLE ME REET ADDRESS TY-ST-ZIP TLE ME REET ADDRESS TY-ST-ZIP TLE ME REET ADDRESS TY-ST-ZIP TLE ME REET ADDRESS TY-ST-ZIP TLE ME REET ADDRESS TY-ST-ZIP TLE ME REET ADDRESS TY-ST-ZIP TLE ME REET ADDRESS TY-ST-ZIP TLE ME REET ADDRESS TY-ST-ZIP TTLE ME REET ADDRESS TY-ST-ZIP TTLE ME REET ADDRESS TY-ST-ZIP TTLE ME REET ADDRESS TY-ST-ZIP TTLE ME REET ADDRESS TY-ST-ZIP	NAME STREET ADDRESS CITY - ST - ZIP Delete Delete Delete Delete TITLE NAME STREET ADDRESS CITY - ST - ZIP Delete TITLE NAME STREET ADDRESS CITY - ST - ZIP Delete TITLE NAME STREET ADDRESS CITY - ST - ZIP CITY - ST - ZIP	ME VINTER, FRANK 205 8TH AVE. ZAMPA FL 33805 NAME LE Delete TTLE ME Delete TTLE ME STRET ADDRESS CITY-ST-ZIP Change Addition V-ST-ZIP Delete TTLE Addition ME STRET ADDRESS V-ST-ZIP STRET ADDRESS CITY-ST-ZIP Change Addition LE Delete TTLE NAME Addition ME STRET ADDRESS V-ST-ZIP CITY-ST-ZIP Change Addition LE Delete TTLE NAME Addition ME CITY-ST-ZIP CITY-ST-ZIP Addition V-ST-ZIP Delete TTLE Addition ME STRET ADDRESS CITY-ST-ZIP Change Addition V-ST-ZIP Delete TTLE Addition NAME STRET ADDRESS CITY-ST-ZIP Change Addition V-ST-ZIP Delete TTLE Change Addition WE STRET ADDRESS CITY-ST-ZIP STRET ADDRESS CITY-ST-ZIP Change Addition WE Delete TTLE NAME STRET ADDRESS CITY-ST-ZIP Change Addition WE STRET ADDRESS CITY-ST-ZIP STRET ADDRESS CITY-ST-ZIP Change Addit							1 Channe	Addition
TY-ST-ZIP AMPA FL 33605 CITY-ST-ZIP ILE Delete TITLE ME STREET ADDRESS STREET ADDRESS TY-ST-ZIP Delete TITLE ME Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP V-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP	CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP	Y-ST-2IP AMPA FL 33805 CITY-ST-2IP LE Delete TTLE NAME STRET ADDRESS Y-ST-ZIP Delete LE Delete TTLE NAME STRET ADDRESS CITY-ST-ZIP LE Delete TTLE NAME STRET ADDRESS CITY-ST-ZIP LE Delete NAME STRET ADDRESS Y-ST-ZIP CITY-ST-ZIP LE Delete WE STRET ADDRESS Y-ST-ZIP CITY-ST-ZIP LE Delete NAME STRET ADDRESS Y-ST-ZIP CITY-ST-ZIP LE Delete TTLE NAME STRET ADDRESS CITY-ST-ZIP LE Delete TTLE NAME STRET ADDRESS Y-ST-ZIP Delete TTLE NAME STRET ADDRESS CITY-ST-ZIP LE Delete TTLE NAME STRET ADDRESS CITY-ST-ZIP LE Delete			NAME					
ILE Delete TITLE Change ME NAME STREET ADDRESS STREET ADDRESS I'LE Delete TITLE Change ME Delete TITLE Change ME REET ADDRESS STREET ADDRESS Change I'LE Delete TITLE Change NAME STREET ADDRESS CITY-ST-ZIP Change I'LE Delete TITLE Change NE Delete TITLE Change NAME STREET ADDRESS CITY-ST-ZIP Change I'LE Delete TITLE Change ME Delete TITLE Change ME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP I'LE Delete TITLE Change ME STREET ADDRESS CITY-ST-ZIP Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP	NAME STREET ADDRESS CITY - ST - ZIP	LE Delete TTLE Change Addition NAME STREET ADDRESS Y-ST-ZIP LE Delete TILE Change Addition NAME STREET ADDRESS Y-ST-ZIP LE Delete TTLE Change Addition NAME STREET ADDRESS CITY-ST-ZIP LE Delete TTLE Change Addition NAME STREET ADDRESS CITY-ST-ZIP LE CHANGE ADDRESS CITY-ST-ZIP LE CHANGE ADDRESS STREET ADDRESS CITY-ST-ZIP LE CHANGE ADDRESS STREET ADDRESS CITY-ST-ZIP								
ITREET ADDRESS STREET ADDRESS TY- ST-ZIP Delete TLE Delete AME ITREET ADDRESS TY- ST-ZIP	STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	REET ADDRESS Y-ST-ZIP STREET ADDRESS CITY-ST-ZIP LE Delete NAME STREET ADDRESS Y-ST-ZIP LE NE NAME STREET ADDRESS Y-ST-ZIP CITY-ST-ZIP LE NAME STREET ADDRESS Y-ST-ZIP CITY-ST-ZIP LE NAME STREET ADDRESS Y-ST-ZIP LE NAME STREET ADDRESS Y-ST-ZIP LE NAME STREET ADDRESS Y-ST-ZIP STREET ADDRESS Y-ST-ZIP	TLE	Delete		•	• -	- · [Change	Addition
TLE Delete TITLE Delete TITLE Change AME STREET ADDRESS STREET ADDRESS CTY-ST-ZIP Change TLE Delete TITLE Change ME Delete TITLE Change ME Delete TITLE Change ME Delete TITLE Change ME STREET ADDRESS STREET ADDRESS Change Y-ST-ZIP CHANGE STREET ADDRESS CHANGE	Delete TiTLE Change Addition NAME STREET ADDRESS CITY-ST-ZIP Change Addition Delete TITLE Change Addition NAME STREET ADDRESS Addition Addition CITY-ST-ZIP CITY-ST-ZIP Change Addition Delete TITLE Change Addition NAME STREET ADDRESS CITY-ST-ZIP Change Addition Delete TITLE Change Addition NAME STREET ADDRESS CITY-ST-ZIP Change Addition CITY-ST-ZIP CITY-ST-ZIP Change Addition NAME STREET ADDRESS CITY-ST-ZIP Change Addition	LE Delete TITLE Change Addition NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition LE Delete TITLE Change Addition ME NAME NAME Addition KEET ADDRESS STREET ADDRESS CITY-ST-ZIP LE Delete TITLE Addition NAME STREET ADDRESS CITY-ST-ZIP Addition LE Delete TITLE Addition NAME STREET ADDRESS CITY-ST-ZIP Addition LE Delete TITLE Addition NAME STREET ADDRESS CITY-ST-ZIP Addition VEET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition VEE Delete TITLE Addition Addition NAME STREET ADDRESS CITY-ST-ZIP Addition Addition VEE TADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP Addition								
AME NAME IREET ADDRESS STREET ADDRESS TY-ST-ZIP CITY-ST-ZIP TLE Delete AME TITLE REET ADDRESS TITLE IREET ADDRESS STREET ADDRESS TY-ST-ZIP Change	NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP	ME NAME REET ADDRESS STREET ADDRESS Y-ST-ZIP Delete ILE Delete NAME NAME STREET ADDRESS Y-ST-ZIP ILE							7.0	
TY-ST-ZIP CITY-ST-ZIP TLE Delete AME NAME REEET ADDRESS STREET ADDRESS TY-ST-ZIP CITY-ST-ZIP	CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP	Y-ST-ZIP CITY-ST-ZIP LE Delete ME TITLE NAME STREET ADDRESS Y-ST-ZIP LE Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP LE Delete Delete TITLE NAME NAME STREET ADDRESS Y-ST-ZIP		LI Delete	·-			L	_] Change	L_] Addition
TLE Delete TITLE Change	Delete TITLE Change Addition NAME STREET ADDRESS CITY-ST-ZIP Change Addition Delete TITLE Change Addition NAME STREET ADDRESS CITY-ST-ZIP Change Addition STREET ADDRESS CITY-ST-ZIP Change Addition CITY-ST-ZIP CITY-ST-ZIP Change Addition	LE Change Addition ME ADDRESS Y-ST-ZIP LE CADDRESS CITY-ST-ZIP LE CADDRESS KEET ADDRESS LE CADDRESS KEET ADDRESS CITY-ST-ZIP LE CADRESS STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP								
AME NAME REET ADDRESS TY- ST-ZIP CITY- ST-ZIP	NAME STREET ADDRESS CITY - ST - ZIP Delete TITLE NAME STREET ADDRESS CITY - ST - ZIP CITY - ST - ZIP	ME NAME KEET ADDRESS STREET ADDRESS Y-ST-ZIP CITY-ST-ZIP LE Delete ME TITLE NAME KEET ADDRESS Y-ST-ZIP CITY-ST-ZIP		Delete				Г	Change	Addition
CITY-ST-ZIP	CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP	Y-ST-ZIP CITY-ST-ZIP LE Delete TITLE Change NAME REET ADDRESS Y-ST-ZIP	ME		NAME				ø-	
LE Delete NTLE Change	NAME STREET ADDRESS CITY-ST-ZIP	ME NAME REET ADDRESS Y-ST-ZIP CITY-ST-ZIP								
	STREET ADDRESS CITY-ST-ZIP	XEET ADDRESS Y-ST-ZIP CITY-ST-ZIP	OT EN	Delete				Ľ] Change	Addition
			TLE		NAME					
	ad with this filing does not evalify for the exemption stated in Section 119 (07(3)(i) Florida Statutes I further certify that the information	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 eport 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 true empowered to effect 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.	LE ME		STREET ADDRESS					