Signalure, typed or private random and the # opticets.     (MOTE Repetition date instructions)     LATE       2.     OFFICERS AND DIRECTORS     13.     ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12       Lie     D     DELETE     11 TITLE     Change     Addition       MRE     STEWART, MARY E     13 STREETADORESS     13 Change     Addition       Vist Zep     D     DELETE     11 TITLE     Change     Addition       Vist Zep     D     DELETE     21 Street ADDRESS     Shaw, Dorothy I       Nist 10071 AVENUE     23 STREET ADDRESS     20 1 S. Canal St.     Yes       Vist Zep     TAMPA FL 33612     24 CTY-ST-ZP     Ruskin, FL 33570     Change     Xiddition       Vist Zep     DELETE     3 STREET ADDRESS     20 1 S. Canal St.     Yes     Yes     Yes       Vist Zep     DELETE     3 STREET ADDRESS     20 1 S. Canal St.     Yes     Yes     Yes       Vist Zep     DELETE     3 STREET ADDRESS     20 1 S. Canal St.     Yes     Yes     Yes       Vist Zep     DELETE     1 TITLE     1 Change     Xiddition     Yes     Yes     Yes       ME     DELETE     3 STREET ADDRESS     20 1 S. Canal St.     Yes     Yes     Yes     Yes       Vist Zep     3 STREET ADDRESS	COR ANNU	NOW: FILING FEE PROFIT PORATION JAL REPORT 1999		FLORIDA DEPAR Katherir Secretary	TMENT OF STATE	FIL Mar 22, 19 Secretary 03-22-1999 9008	999 8:00 of Stat	te
No. No. Description     1100 P. NEBROSKA AVENUE       IPAR PL 35812     DO NOT WRITE IN THIS SPACE       IPAR PL 35812     DO NOT WRITE IN THIS SPACE       IPAR PL 35812     DO NOT WRITE IN THIS SPACE       IPAR PL 35812     DO NOT WRITE IN THIS SPACE       IPAR PL 35812     DO NOT WRITE IN THIS SPACE       IPAR PL 35812     DO NOT WRITE IN THIS SPACE       Strate Plant	Corporation MARY SI	TEWART AFFORDABLE	Homes, in	IC.				
IMA P. 1. 35812     TAMPA P. 1. 35812       Principal Place of Business     Za. Mailing Address       Suite, Apl. F., etc.     Site, Apl. F., etc.       Soute, Apl. F., etc.     Site, Apl. F., etc.       Top 2     Country       Za     Country       State     Country       State     State	•							
A. Date known product         Applied Filter           Principal Place of Business         2a. Mailing Address         4. FEI Nonkey         Solite, Add. #, etc.         5. Certificate of Status Desired         Solite, Add. #, etc.         5. Certificate of Status Desired         Solite, Address         Solite, Add. #, etc.         5. Certificate of Status Desired         Solite, Address         Solite, Add. #, etc.         Solite, Address         Solite,				==.	JE			
Principal Place of Business         Za.         Mailing Address         Za.         Mailing Address         A.         FILMMark State         Applied For           Strith, Apt. R. etc.         2a         Suite, Apt. R. etc.         Strith, Apt. R. etc.         Str							THIS SPACE	
Principal nace of ocentrols       20       Rest Apt. R. etc.       20       Soute, Apt. R. etc.       20		ì				· · ·		
Suite, Apt. #, etc.       21       Suite, Apt. #, etc.       27       Certificate of Status Desired       Fee Required         City & State       28       Chy & State       Certificate of Status Desired       Fee Required         Zip       Country       20       Country       8. This corporation overs the current year Interruption       Added to Fees         Zip       Country       20       Country       8. This corporation overs the current year Interruption       Added to Fees         Status Desired       29       30       Personal Property Tax.       Mes       No         9. Name and Address of Current Registered Agent       10. Name and Address of New Registered Agent       10. Name and Address of New Registered Agent       10. Name and Address of New Registered Agent         FLUNGS, INC.       3732 N.W. 16TH STREET       11 Mane       10. Name and Address (P.O. Box Number is Not Acceptable)       10. Name and Address (P.O. Box Number is Not Acceptable)         FFL AND DEROLE FL 33311-4132       83       10. Name and Address to Feed Agent       10. Name and Addresto Feed Agent       10. Name and Ad	Principal Pla	ace of Business		ailing Address	<u> </u>	4. FEI Number		
City & State       21       S. Cettrate of Status Dealing       Fee Required         City & State       City & State       S. Electron Campaign Financing       \$S.000 May be available of the second property Tax.       Truet Fund Contribution       \$S.000 May be available of the second property Tax.       Pressould Propery Tax.       Pressould Property Tax.       Pres	Suite Apt (	#. etc.		uite, Apt. #, etc.	. <u> </u>			
Zip     Country     Zip     Country     Zip     Country     Added to Fees       Zip     Zip     Country     8. This corporation over the current year lengthile personal Property Tas.     Yes     No       3. Name and Address of Ournent Registered Agent     10. Name and Address of New Registered Agent     10. Name and Address of New Registered Agent       FUINGS, INC. 3728 NW, 16TH STREET FT. LAUDERDALE FL 33311-1132     11     12     Street Address (P.O. Box Number is Not Acceptable)       FUINGS, INC. 3728 NW, 16TH STREET FT. LAUDERDALE FL 33311-1132     13     14     Street Address (P.O. Box Number is Not Acceptable)       FUNDALINE to the provisions of Sections 607 0502 md 607 /1508. Florida Statutes, the above-named comporation submits this statement for the purpose of changing large gistered agent, or boh, in the State of Florida Statutes was authorized by the corporation's band of directors.     15       Corpecters And Directors     07. Store Agent agent, or boh, in the State of Florida Statutes was authorized by the corporation's band of directors.     16       Stream Toped or prices and agent at the registered agent agent at the registered agent ag	Quito, / 4 /					5. Certifcate of Status Desired		·
Zip       Country       Zip       Country       8. This corporation owes the current year Intengible       No         3. Name and Address of Current Registered Agent       0. Name and Address of Current Registered Agent       10. Name and Address of New Registered Agent       Name and Address of New Registered Agent         FILINGS, INC.       3732 N.W. 16TH STREET       11. Name and Address of Current Registered Agent       12. Street Address (P.O. Box Number is Not Acceptable)         F1.       F1. AUDERDALE FL 33311-4132       13. Name and Address of Country       18. This corporation was the current year Intengible         Country       F1. Audoender Agent       14. Name       14. Name       14. Name         Country       F1. Audoender Agent       18. Name and Address of New Registered Agent       18. This corporation was the current year Intengible         Country       F1. Audoender Agent and Address of Diodd. Statute hange was authored 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 Statute:       13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Now for Integer Address TO Address ID OFFICERS AND DIRECTORS IN 12. Now for Integer Address ID OFFICERS AND DIRECTORS IN 12. Now for Integer Address ID OFFICERS AND DIRECTORS IN 12. Now for ID INTEGER INTEG	City & State	8		City & State				
Ide Street Address of New Registered Agent     Ide Name and Address of New Registered Agent     Ide Name     Ide Name and Address of New Registered Agent     Ide Name     Ide Name and Address of New Registered     Ide Name     Ide Name and Address of New Registered     Ide Name     Ide Nam	Zip	Country		ip	Country			
FILINGS, INC. 3732 NW. 16TH STREET FT. LAUDERDALE FL 33311-4132       1       1       Name         12       Street Address (P.O. Box Number is Not Acceptable)       1         13       Address (P.O. Box Number is Not Acceptable)       1         14       Pursuant to the provisions of Sectors 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered directors. I hereby accept the appointment as 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, 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, 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, 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, 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, or both, in the State of Florida. Statutes authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Statutes authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Statutes authorized by the appoint and the registered agent, or both, in the State of Florida. Statutes at the registered agent, or both, in the State of Florida. Statutes at the registered agent, or both, in the State of Florida. State of Florida. State of Florida. Sta					30			🗍 No
3732 N.W. 16TH STREET     FT. LAUDERDALE FL 33311-4132      2     Street Address (P.O. Box Number is Not Address (P.O. Bo		9. Name and Address of Cu	urrent Register	red Agent	81 Name	10, Name and Address of New Regis	tered Agent	
3732 N.W. Tell H STREEL     FT. LAUDERDALE FL 33311-4132						ddross (P.O. Box Number is Not Accentable)		
64         City         FL         85         Zip Code           - Pursuant to the provisions of Sections 807.0502 and 807.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of charging its registered agent and each it is distant as registered agent and each its and accept the obligations of Section 607.0502. Florida Statutes.         In each it is a florida statutes.           CMATURE         Statute			•		62 Sileer A			
I. Pursuant to the provisions of Sections 607 0502 and 807 1508. Florids Statutes. the above named corporation submits this statement for the purpose of charging its registered diffect or registered agent. or both, in the State of Florida. Such charge was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I cm familiar with, and accept the obligations of, Section 607 0502 and 807 1508. Florida Statutes.  Signature, typed of private name of registered agent and the figologie. (NOTE: Registered Agent Lignature vectors during its registered in the figologie. (NOTE: Registered Agent Lignature vectors during its construction).  Are:  Signature, typed of private name of registered agent and the figologie. (NOTE: Registered Agent Lignature vectors during its construction).  COFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  COFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  COFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  Construction: The purpose of the approximate of of the approximat	F1. L	LAUDERDALE FL 33311-413	2		83			
I. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes. The above named comparison submits this statement for the purpose of changing its registered office or registered agent, and accept the object of the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the object of the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the object of the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the object of printed name of registered agent agent and the if applicable.  (NOTE: Registered Agent signature required where reintability)  ACTE  C. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  LE  D  COFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  LE  D  STEWART, MARY E  STE					1 1			
ME       STEWART, MARY E       12/MME         REET ADDRESS       13 STREET ADDRESS       13 STREET ADDRESS         Y-ST-ZP       RIVERVIEW FL 33569       14 GTV-ST-ZP         NE       SHAW, DOROTHY I       21 MME         SHAW, DOROTHY I       23 STREET ADDRESS       20 I S. Canal St.         Y-ST-ZP       TAMPA FL 33612       2.4 GTV-ST-ZP         NE       DELETE       31 STREET ADDRESS         Y-ST-ZP       TAMPA FL 33612       2.4 GTV-ST-ZP         NE       DELETE       31 STREET ADDRESS         NME       Shaw, Gene C       20 I S. Canal St.         NY-ST-ZP       JA GTV-ST-ZP       Ruskin, FL 33570         VST-ZP       DELETE       4 GTV-ST-ZP         Neet ADDRESS       STREET ADDRESS       Change         V-ST-ZP       DELETE       5 TTTLE         LE       DELETE       5 TTTLE       Change         NEET ADDRESS       S	I. Pursuant t	edistered agent or both in the S	State of Florida	Such change was al	es, the above-named of the corpored by the cor	corporation submits this statement for the purp ration's board of directors. I hereby accept the	FL	registered
RIVERVIEW FL 33569       14 GTY-ST-ZP         LE       D       DELETE       21 TITLE         ME       SHAW, DOROTHY I       22 NAME       Shaw, Dorothy I       22 Of S. Cañal St.         Y-ST-ZP       TAMPA FL 33612       24 GTY-ST-ZP       Ruskin, FL 3357.0       Change       Addition         NE       DELETE       31 TITLE       22 NAME       Shaw, Gene C       Start and St.	I. Pursuant t office or re agent. I ar IGNATURE	egistered agent, or both, in the S m familiar with, and accept the o Signature, typed or printed name of register OFFICER	State of Florida. bbligations of, S ed agent and title if a	Such change was al ection 607.0505, Flor oplicable. (NOTE: TORS	es, the above-named c thorized by the corpo ida Statutes. Registered Agent signature re	quired when reinstating)	Ose of changing its is appointment as reg       ATE       RS AND DIRECTOR	registered istered
Image: Second state information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1). Florida Statutes. 1 further certify that the information       Image: Shaw, Dorothy I         10:10:10:10:10:10:10:10:10:10:10:10:10:1	I. Pursuant t office or re agent. I ar	egistered agent, or both, in the S m familiar with, and accept the o Signature, typed or printed name of register OFFICER D STEWART, MARY E	State of Florida. biligations of, S ad agent and title if a S AND DIREC	Such change was al ection 607.0505, Flor oplicable. (NOTE: TORS	es, the above-named c thorized by the corporida Statutes. Registered Agent signature re 13. 1.1 TITLE	quired when reinstating)	Ose of changing its is appointment as reg       ATE       RS AND DIRECTOR	registered iistered RS IN 12
ME       SHAW, DOROTHY I         NEE       1418-108TH AVENUE         TAMPA FL 33612       24 CTY-ST-2P         TAMPA FL 33612       24 CTY-ST-2P         REET ADDRESS       31 TITLE         ME       31 TITLE         ME       32 STREET ADDRESS         201 S. Canal St.         Y-ST-2P       Ruskin, FL 33570         LE       31 TITLE         ME       32 STREET ADDRESS         Y-ST-2P       34 CTY-ST-2P         REET ADDRESS       33 STREET ADDRESS         Y-ST-2P       0 DELETE         LE       0 DELETE         ME       42 NAME         STREET ADDRESS       201 S. Canal St.         Y-ST-2P       34 CTY-ST-2P         REET ADDRESS       42 NAME         Y-ST-2P       44 CTY-ST-2P         NE       10 DELETE         STREET ADDRESS       11 TITLE         Y-ST-2P       44 CTY-ST-2P         LE       0 DELETE         STREET ADDRESS       11 TITLE         Y-ST-2P       10 DELETE         LE       0 DELETE         STREET ADDRESS       11 TITLE         Y-ST-2P       10 DELETE         LE       0 STREET AD	I. Pursuant to office or re agent. I ar GNATURE LE ME	Signature, typed or printed name of register OFFICER STEWART, MARY E 10322 ASHLEY OAKS DR	State of Florida. biligations of, S ad agent and title if a S AND DIREC	Such change was al ection 607.0505, Flor oplicable. (NOTE: TORS	Registered Agent signature re 13. 1.1 TITLE 1.3 STREET ADDRESS	quired when reinstating)	Ose of changing its is appointment as reg       ATE       RS AND DIRECTOR	registered iistered RS IN 12
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LE       DELETE       31 TTLE       Change       (2) Addition         ME       32 NAME       Shaw, Gene C       33 STREET ADDRESS       201 S. Canal St.         Y.ST-ZIP       34. CTY-ST-ZIP       Ruskin, FL 33570       Change       Addition         LE       DELETE       4.1 TTLE       Change       Addition         ME       Active Street ADDRESS       201 S. Canal St.       Addition         Y.ST-ZIP       DELETE       4.1 TTLE       Change       Addition         ME       Active Street ADDRESS       4.3 STREET ADDRESS       Addition         Y-ST-ZIP       4.4 CTY-ST-ZIP       Change       Addition         ME       DELETE       5.1 TTLE       Change       Addition         ME       Street ADDRESS       Street ADDRESS       Addition         Y-ST-ZIP       Active Street ADDRESS       Street ADDRESS       Addition         Y-ST-ZIP       DELETE       5.1 TTLE       Change       Addition         ME       BEET ADDRESS       Street ADDRESS       Street ADDRESS       Addition         Y-ST-ZIP       DELETE       6.1 TTLE       Change       Addition         ME       BEET ADDRESS       Street ADDRESS       Street ADDRESS       Active Street ADDRESS <td>Pursuant t office or re agent. I ar GNATURE</td> <td>egistered agent, or both, in the S m familiar with, and accept the o Signature, typed or printed name of register OFFICER D STEWART, MARY E 10322 ASHLEY OAKS DRI RIVERVIEW FL 33569 D</td> <td>State of Florida. biligations of, S ad agent and title if a S AND DIREC</td> <td>Such change was at ection 607.0505, Flor</td> <td>Registered Agent signature re 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE</td> <td>quired when reinstating) D</td> <td>ATE RS AND DIRECTOR Change</td> <td>registered istered RS IN 12</td>	Pursuant t office or re agent. I ar GNATURE	egistered agent, or both, in the S m familiar with, and accept the o Signature, typed or printed name of register OFFICER D STEWART, MARY E 10322 ASHLEY OAKS DRI RIVERVIEW FL 33569 D	State of Florida. biligations of, S ad agent and title if a S AND DIREC	Such change was at ection 607.0505, Flor	Registered Agent signature re 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE	quired when reinstating) D	ATE RS AND DIRECTOR Change	registered istered RS IN 12
ME       32 NAME       Shaw, Gene C         REET ADDRESS       33 STREET ADDRESS       201 S. Canal St.         Y.ST-ZIP        RUSKin, FL 33570         LE        DELETE       41 TITLE         ME            KEET ADDRESS            V.ST-ZIP            ME            V.ST-ZIP            V.ST-ZIP            LE             V.ST-ZIP             LE              V.ST-ZIP              LE        DELETE       S1 TITLE            V.ST-ZIP               LE        DELETE       6.1 TITLE             ME	Pursuant t office or re agent. I ar GNATURE	egistered agent, or both, in the S m familiar with, and accept the o Signature, typed or printed name of register OFFICER D STEWART, MARY E 10322 ASHLEY OAKS DRI RIVERVIEW FL 33569 D SHAW, DOROTHY I 1418 108TH AVENUE	State of Florida. biligations of, S ad agent and title if a S AND DIREC	Such change was at ection 607.0505, Flor	Registered Agent signature re 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME	auired when reinstating) D ADDITIONS/CHANGES TO OFFICE Shaw, Dorothy I 201 S. Cañal St.	ATE RS AND DIRECTO	registered istered RS IN 12
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LE       DELETE       4.1 TTLE       Change       Additio         WE       4.2 NAME       4.3 STREET ADDRESS       4.3 STREET ADDRESS         Y-ST-ZIP       4.4 CTY-ST-ZIP       Change       Additio         LE       DELETE       5.1 TTLE       Change       Additio         ME       5.2 NAME       5.2 NAME       Change       Additio         V-ST-ZIP       DELETE       5.1 TTLE       Change       Additio         WE       5.2 NAME       5.3 STREET ADDRESS       6.4 CITY-ST-ZIP       Change       Additio         V-ST-ZIP       DELETE       6.1 TTLE       Change       Additio         WE       0 DELETE       6.1 TTLE       Change       Additio         WE       0.3 STREET ADDRESS       6.3 STREET ADDRESS       Additio         Y-ST-ZIP       6.4 CITY-ST-ZIP       Change       Additio         WE       6.3 STREET ADDRESS       6.4 CITY-ST-ZIP       Change       Additio         WE       6.3 STREET ADDRESS       6.4 CITY-ST-ZIP       Change       Additio         V-ST-ZIP       6.4 CITY-ST-ZIP       6.4 CITY-ST-ZIP       Change       Additio         WE       6.4 CITY-ST-ZIP       6.4 CITY-ST-ZIP       Change       Additio <td>Pursuant t office or re agent. I ar GNATURE E KEET ADDRESS Y-ST-ZIP LE KEET ADDRESS Y-ST-ZIP LE</td> <td>egistered agent, or both, in the S m familiar with, and accept the o Signature, typed or printed name of register OFFICER D STEWART, MARY E 10322 ASHLEY OAKS DRI RIVERVIEW FL 33569 D SHAW, DOROTHY I 1418 108TH AVENUE</td> <td>State of Florida. biligations of, S ad agent and title if a S AND DIREC</td> <td>Such change was at ection 607.0505, Flor</td> <td>A city-st-zip as, the above-named of thorized by the corpor- ida Statutes. Registered Agent signature re <b>13.</b> 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE</td> <td>ADDITIONS/CHANGES TO OFFICE ADDITIONS/CHANGES TO OFFICE Shaw, Dorothy I 201 S. Canal St. Ruskin, FL 33570</td> <td>FL         ose of changing its i         appointment as reg         ATE         RS AND DIRECTOI         Change         X Change</td> <td>registered istered RS IN 12 Addition</td>	Pursuant t office or re agent. I ar GNATURE E KEET ADDRESS Y-ST-ZIP LE KEET ADDRESS Y-ST-ZIP LE	egistered agent, or both, in the S m familiar with, and accept the o Signature, typed or printed name of register OFFICER D STEWART, MARY E 10322 ASHLEY OAKS DRI RIVERVIEW FL 33569 D SHAW, DOROTHY I 1418 108TH AVENUE	State of Florida. biligations of, S ad agent and title if a S AND DIREC	Such change was at ection 607.0505, Flor	A city-st-zip as, the above-named of thorized by the corpor- ida Statutes. Registered Agent signature re <b>13.</b> 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE	ADDITIONS/CHANGES TO OFFICE ADDITIONS/CHANGES TO OFFICE Shaw, Dorothy I 201 S. Canal St. Ruskin, FL 33570	FL         ose of changing its i         appointment as reg         ATE         RS AND DIRECTOI         Change         X Change	registered istered RS IN 12 Addition
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ME       62 NAME         REET ADDRESS       6.3 STREET ADDRESS         Y-ST-ZIP       6.4 CITY-ST-ZIP         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 information is the order of the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information is the order of the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information is the order of the exemption is the order of the exemption is the order of the exemption.	Pursuant t office or re agent. 1 ar GNATURE LE KEETADDRESS Y-ST-ZIP LE KEETADDRESS Y-ST-ZIP LE ME REETADDRESS Y-ST-ZIP LE ME REETADDRESS Y-ST-ZIP LE ME REETADDRESS	egistered agent, or both, in the S m familiar with, and accept the o Signature, typed or printed name of register OFFICER D STEWART, MARY E 10322 ASHLEY OAKS DRI RIVERVIEW FL 33569 D SHAW, DOROTHY I 1418 108TH AVENUE	State of Florida. biligations of, S ad agent and title if a S AND DIREC	Such change was at ection 607.0505, Flor	As, the above-named c thorized by the corpo- ida Statutes. Registered Agent signature re 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME	ADDITIONS/CHANGES TO OFFICE ADDITIONS/CHANGES TO OFFICE Shaw, Dorothy I 201 S. Canal St. Ruskin, FL 33570 Shaw, Gene C 201 S. Canal St. Ruskin, FL 33570	FL         ose of changing its i         appointment as reg         ATE         RS AND DIRECTOI         Change         X Change         Change         Change         Change	egistered istered RS IN 12 Addition
ME       6.3 STREET ADDRESS         REET ADDRESS       6.4 CITY- ST-ZIP         I. 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 information is the addition of the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information is the information accurate and that my simplify the same lengt effect as if made under oath; that I am an information is the information is the information.	Pursuant t office or re agent. 1 ar GNATURE LE KEET ADDRESS Y-ST-ZIP LE KEET ADDRESS Y-ST-ZIP LE KEET ADDRESS Y-ST-ZIP LE KEET ADDRESS Y-ST-ZIP LE KEET ADDRESS	egistered agent, or both, in the S m familiar with, and accept the o Signature, typed or printed name of register OFFICER D STEWART, MARY E 10322 ASHLEY OAKS DRI RIVERVIEW FL 33569 D SHAW, DOROTHY I 1418 108TH AVENUE	State of Florida. biligations of, S ad agent and title if a S AND DIREC	Such change was at ection 607.0505, Flor pplicable. (NOTE: TORS DELETE DELETE DELETE DELETE DELETE DELETE DELETE	A ctry-st-zip 3. street ADDRESS 3.4 ctry-st-zip 4.1 tritle 4.2 NAME 4.2 NAME 4.2 NAME 4.3 STREET ADDRESS 4.4 ctry-st-zip 4.1 tritle 4.2 NAME 4.3 STREET ADDRESS 4.4 ctry-st-zip 4.1 tritle 4.3 STREET ADDRESS 4.4 ctry-st-zip 5.1 tritle 5.2 NAME 5.3 STREET ADDRESS 5.4 ctry-st-zip 5.1 tritle 5.3 STREET ADDRESS 5.4 ctry-st-zip	ADDITIONS/CHANGES TO OFFICE ADDITIONS/CHANGES TO OFFICE Shaw, Dorothy I 201 S. Canal St. Ruskin, FL 33570 Shaw, Gene C 201 S. Canal St. Ruskin, FL 33570	FL         ose of changing its i         appointment as reg         ATE         RS AND DIRECTOI         Change         Image	egistered istered RS IN 12 Addition
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4. 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 is the information of the same lease the same lease that the same lease the same lease that the an an	I. Pursuant t office or re agent. I ar GNATURE 2. LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP	egistered agent, or both, in the S m familiar with, and accept the o Signature, typed or printed name of register OFFICER D STEWART, MARY E 10322 ASHLEY OAKS DRI RIVERVIEW FL 33569 D SHAW, DOROTHY I 1418 108TH AVENUE TAMPA FL 33612	State of Florida. biligations of, S ad agent and title if a S AND DIREC	Such change was at ection 607.0505, Flor pplicable. (NOTE: TORS DELETE DELETE DELETE DELETE DELETE DELETE DELETE	As, the above-named c ithorized by the corpo- ida Statutes. Registered Agent signature re 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4. CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME	ADDITIONS/CHANGES TO OFFICE ADDITIONS/CHANGES TO OFFICE Shaw, Dorothy I 201 S. Canal St. Ruskin, FL 33570 Shaw, Gene C 201 S. Canal St. Ruskin, FL 33570	FL         ose of changing its i         appointment as reg         ATE         RS AND DIRECTOI         Change         Image	egistered istered RS IN 12 Addition
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		egistered agent, or both, in the S m familiar with, and accept the o Signature, typed or printed name of register OFFICER D STEWART, MARY E 10322 ASHLEY OAKS DRI RIVERVIEW FL 33569 D SHAW, DOROTHY I 1418 108TH AVENUE TAMPA FL 33612	State of Florida. biligations of, S ed agent and utle if al S AND DIREC VE	Such change was at ection 607.0505, Flor	A crry-st-zip 4.1 tritle 3.3 street ADDRESS 3.4 crry-st-zip 4.1 tritle 3.3 street ADDRESS 3.4 crry-st-zip 3.1 tritle 3.2 NAME 3.3 street ADDRESS 3.4 crry-st-zip 4.1 tritle 4.2 NAME 3.3 street ADDRESS 3.4 crry-st-zip 4.1 tritle 4.3 street ADDRESS 3.4 crry-st-zip 5.1 tritle 5.2 NAME 5.3 street ADDRESS 5.4 crry-st-zip 5.1 tritle 5.3 street ADDRESS 5.4 crry-st-zip	quired when reinstating) 0 ADDITIONS/CHANGES TO OFFICE Shaw, Dorothy I 201 S. Canal St. Ruskin, FL 33570 Shaw, Gene C 201 S. Canal St. Ruskin, FL 33570	FL         ose of changing its i         appointment as reg         ATE         RS AND DIRECTOI         Change         Image         Image	egistered iistered RS IN 12 Addition