1. Entity Nam	MENT # <b>P990000</b>	02951			FIL Apr 06, 20 Secretary 04-06-2000 9003	(ED) 000 8:00 an y of State 35 032 ***158.75
Principal Plac	e of Business	Mailing Address				100.70
1571 NORTHWEST THIRD PLACE PLANTATION FL 33317-:		4571 NORTHWEST THIRD PLACE PLANTATION FL 33317-2744				
	Place of Business	3. Mailing Address P. J. Box Suite, Apt. #, etc.	270			ile Balik ilülü iütel olimi ile ieni
City & State Summer Fiero, FL Zip Country		City & State Summer FIGLU, FL. Zip Country		•	FEI Number	Applied For Not Applicable \$8.75 Additional
3449	1 MARION	34492-	MARI	on	Certificate of Status Desired	Fee Required
<u> </u>	6. Name and Address of Current R	egistered Agent	Name	7.	Name and Address of New Registe	red Agent
4571	(, Janet S ) Northwest Third Place Ntation FL 33317-;		Street A	.ddress (P.O.	Box Number is Not Acceptable)	East-
	······		City		C	
9 The above	named entity submits this statement for	the purpose of changing its r			2.3/ELD	FL   3 449/
SIGNATURE .	Signature, typed or printed name of registered agent an	d title if applicable. (NOTE:	Registered Agent signal	ure required when	reinstating) D/	ate
9 This corpo	pration is eligible to satisfy its Intangible		FEE IS \$150.			
Tax filing r	requirement and elects to do so.	After MAY 1, 200 Make Check Payabl	0 Fee will be \$5	50.00	10. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be
11. 1715	OFFICERS AND D	· · · · · · · · · · · · · · · · · · ·	12.		DDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SINK, JANET S 4571 NORTHWEST THIRD PLACE PLANTATION FL 33317-;	Deiste	NAME STREET ADDRESS CITY-ST-ZIP	SiNK	ANETS ANETS	
TITLE NAME	D COOK, JAMES L	Delete	TITLE NAME	See'y Cook	ARRESLO, FL. 344	Change 🗌 Addition
STREET ADDRESS	3258 LINCOLN WAY		STREET ADDRESS CITY-ST-ZIP	3808	SE ISO STREAT	, 1449
TITLE NAME STREET ADDRESS	COOPER CITY FL 33026	Delete	TITLE NAME STREET ADDRESS	D Roga	AAMES L SE ISO STREAT MERFIELA, FL. 39 R. W. LEA I E. LOCHNAY LAN N, AZ. 85747	Change 🖬 Addition
CITY-ST-ZIP			CITY-ST-ZIP	Tues	ON, AZ. 85747	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change 🗌 Addition
OTT OT EN		Delete	TITLE NAME STREET ADDRESS			Change Addition
title Name Street address			CITY-ST-ZIP	[	····	
NAME			TITLE			Change 🗌 Addition
NAME STREET ADDRESS		Deiete	NAME STREET ADORESS CITY-ST-ZIP			
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 13. I hereby of indicated of the cor	certify that the information supplied with t on this report or supplemental report is t poration or the receiver or trustee empov or on an attachment with an address, wi	his filing does not cualify for rue and accurate and that m vered to execute this report a	STREET ADDRESS CITY-ST-ZIP the exemption sta	have the same	e legal effect as if made under oath: th	at I am an officer or director