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Suite. Apr. 4, etc. Suite. Apr. 4, etc. DO NOT WRITE IN THIS SPACE Coy & State Chy & State Chy & State Acplied For Zo Country Zip Country S. Certificate of Status Desired Bx 75 Applicate Zo Country Zip Country S. Certificate of Status Desired Bx 75 Applicate Zo Country Zip Country S. Certificate of Status Desired Bx 75 Applicate C T CORPORATION SYSTEM Igo S. FINE ISLAND RD. PLANTATION FL 33324 Name Stree: Address of Not Acceptable) PLANTATION FL 33324 Difference Stree: Address of Not Acceptable) FL Zip Code SIGNATURE The above named antity submits this statement for the purpose of changing its registered agent, or both, in the State of Fonds. State AAP X AP	5811 PELICAN	BAY BLVD., STE. 500	5811 PELICAN BAY BLVD	STE. 500				
City & State City & City & State City	2. Principal f	Place of Business	3. Mailing Address					
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1200 S. PINE (SLAND RD.) Sheef Address (? O. Box Number is Not Acceptable) PLANTATION FL 33324 City FL Zip Code 8. The above named entry submits this statement for the purpose of changing its registered office or reg stered agent, or both, in the State of Florida. SideAnTURE Entry Comparison is eighble to satisfy its Imangible DVIE: Ingenerative requires due were wreating) DVIE 9. This corporation is eighble to satisfy its Imangible (See orthon on back) FILE NOW!!! FEE IS \$150.00 Mark the wreating in the State of Florida. Intel Contribution. \$5.00 Mark the Address (? O. Box Number is not Acceptable) 10. Election Campaign Financing in State (Contribution. Intel Contribution. \$5.00 Mark the Address (? O. Box Number is Not Acceptable) 11. CO OFFICERS AND DIFECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIFECTORS IN 11 11. CO OFFICERS AND DIFECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIFECTORS IN 11 11. CO OFFICERS AND DIFECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIFECTORS IN 11 11. CO OFFICERS AND DIFECTORS IN 11 Intel Control				Name		· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · ·
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SIGNATURE genities, speed or prime rank of regulated agen and tide / applicable (NOTE: Reginared Agen agrained regulates when rensmite) DNE 9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 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 11. OFFICERS AND DIFECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIFECTORS IN 11 THE SCHOEN, WILLIAM J STRET ADDRSS S011 PELCAN BAY BLVD, STE. 500 (PT-ST-2P) 12. ADDITIONS/CHANGES TO OFFICERS AND DIFECTORS IN 11 THE NAME SCHOEN, WILLIAM J STRET ADDRSS S011 PELCAN BAY BLVD, STE. 500 (PT-ST-2P) 12. ADDITIONS/CHANGES TO OFFICERS AND DIFECTORS IN 11 THE NAME SCHOEN, WILLIAM J STRET ADDRSS S011 PELCAN BAY BLVD, STE. 500 (PT-ST-2P) INE NAME INE SCHOEN, WILLIAM J STRET ADDRSS S011 PELCAN BAY BLVD, STE. 500 (PT-ST-2P) INE NAME Inter NAME STRET ADDRSS S011 PELCAN BAY BLVD, STE. 500 (PT-ST-2P) STRET ADDRSS S011 PELCAN BAY BLVD, STE 500 (PT-ST-2P) Inter NAME Inter NAME STRET ADDRSS S011 PELCAN BAY BLVD, STE 500 (PT-ST-2P) Inter NAME STRET ADDRSS S011 PELCAN BAY BLVD STE 500 (PT-ST-2P) Inter NAME Inter NAME STRET ADDRSS S011 PELCAN BAY BLVD STE 500 (PT-ST-2P) STRET ADDRSS S011 PELCAN BAY BLVD STE 500 (PT-ST-2P)				City		· · · · · · · · · · · · · · · · · · ·	FL Zip Cod	e
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International and 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 supplied with an address, with all other like empowered. International and the information supplied with an address, with all other like empowered. SIGNATURE: Addition the information supplied with an address, with all other like empowered. Robert E. Farnham 3~15-2001 (941) 598-3051	NAME STREET ADDRESS	DSV PARRY, TIMOTHY R 5811 PELICAN BAY BLVD., STE. !		NAME STREET ADDRESS			Change	Addition
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13. I hereby certify that the information supplied with this filling 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. SIGNATURE: Robert E. Farnham 3-15-2001 (941) 598-3051	NAME STREET ADDRESS		Delete	NAME STREET ADDRESS	Farnhan 5811 Pe	elican Bay Blvd.,		Addition
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