DOCU 1. Entity Narr	MENT # P990000873	N I		Apr 2 See	FILI 3, 2007 cretary	ED 07 08:00 AM by of State	
Principal Plac 1736 WILSH LAKELAND, I		Mailing Address 1736 WILSHIRE COURT LAKELAND, FL 33813	•				
DO NOT WRITE IN THIS SPACE				04182007 4. FEI Numb 59-360	No Chg-P er	CR2E034 (413 M@301 M()IM@1 14 3MM)
	6. Name and Address of Current Re IARLENE SHIRE COURT D, FL 33813	gistered Agent			NOT W THIS SP		-
	named entity submits this statement for th ions of registered agent. Signature, typed or printed name of registered agent and		ed office or register		Ith, in the State of Flo	rida. I am famil DATE	iar with, and accept
After Ma	E NOWIII FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00			.00 May Be ed to Fees			
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DI PTSD KIESS, CHARLENE 1736 WILSHIRE CT LAKELAND, FL 33813				U000 05/02/0	00723181 7-80061-	017 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	анананан алан алан алан алан алан алан				NOT W THIS SP		
NAME -STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP						ACL	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	atify that the information of a list of the						
of the corp	ertify that the information supplied with thi on this report or supplemental report is tru poration or the receiver or trustee empowe or on an altachment with an address, with URE:	e and accurate and that my signal red to execute this report as requi	iure shali have the s	ame legal effec	t as if made under o	ath: that i am ar	officer or director

..