DOCU 1. Entity Narr	MENT # P9900009	93355				Jul 07, Secre	FIL 200 tary 000 90183	0 8: of \$	State
Principal Plac	ce of Business	Mailing Address	- <u>19</u> -	478	j				
1215 BRONTE COURT DRLANDO FL 32835		8215 BRONTE COURY ORLANDO FL 32836-8736							
2, Principal Place of Business		3. Mailing Address							
Suile, Apt. #, etc.		Suite, Apt. #, etc.			1	DO NOT WRIT	TE IN THIS S	PACE	
City & State		City & State			4. FE	Number 360 75	59		oplied For ot Applicable
Zîp	Country	Zip	Country	,		erjificate of Status Desired,	<u>п</u> \$	8.75 Ad	ditional
	6. Name and Address of Current Re	gistered Agent	1		1	ame and Address of New R	· · · ·	ee Require gent	
NES		Name			<u> </u>				
DESANTIS, BALINDA 6215 BRONTE COURT				Street Address (P.O. Box	x Number is Not Acceptable	<u>)</u>		
ORL	ANDO FL 32836		Ļ	City				Zip Coc	
	named entity submits this statement for th					4 4	FL		
Tax filing r	Signature, typed or printed neme of registered agent and pration is eligible to satisfy its Intangible requirement and elects to do so. ria on back)	FILE NOW After MAY 1, 20 Make Check Payat	III FEE IS 000 Fee wi	il be \$550.00		10. Election Campaign Fin Trust Fund Contribution			0 May Be to Fees
1.	OFFICERS AND DI		12. TITLE		ADD	ITIONS/CHANGES TO OFF		DIRECTOR	S IN 11
itle IAME Itreet Address Itty-st-zip	DESANTIS, BALINDA 8215 BRONTE COURT ORLANDO FL 32836		NAME	ADDRESS - ZIP					
TTLE IAME ITREET ADDRESS ITTY-ST-21P	TD THOMPSON, GEOFFREY TODD 8215 BRONTE COURT ORLANDO FL 32836	Deleta	TITLE NAME STREET	ADDRESS - ZIP				Change	Addition
ITLE AME TREET ADDRESS ITY-ST-21P	··	Delete	- TITLE NAME STREET	NDORESS - ZIP	•	k		Change_	, 🗋 Addition
ITLE AME TREET ADDRESS ITY-ST-ZIP	· · · ·	Delete	RTLE NAME Street City-Si	ADDRESS - ZIP				Change	Addition
ITLE AME TREET ADDRESS ITY- ST- ZIP	•	Celete	TITLE NAME STREET	ADORESS - ZIP	<u> </u>	· · ·		Change	C Addition
ITLE Ame Treet adoress Ity-st-zip		Delete	TITLE NAME STREET CITY-ST	NDORESS - ZIP				Change	[] Addition
3. I hereby c	certify that the information supplied with thi	is filing does not qualify fo ue and accurate and that re- red to execute this report a all other like empowered.	or the exemp	tion stated in Se	same leo	19.07(3)(i), Florida Statutes. I	further certil	ly that the i	or director 1

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