CORI ANNU	PROFIT PORATION IAL REPORT)		B. Mortha ary of State	m		r 08 1 Secreta			
	MENT #	SO3895 LOGICAL ASSO	DCIATES,	(7) P.A.			 I NUONNAU IN NOI				
icipal Place W STATE F TE 206 IGWOOD FL			SUITE 206	ATE RD 434	162		3. Date Incorpora		3a. Date		
Principal Ph	ace of Business		2a. Mailing	Address			10/01/1990 4. FEI Number		04/29		blied For
nnaiparrie	ace of pusheas		26	y nauress			59-30285	98			Applicable
Suite, Apt. #	#, elc		Suite, /	Apt. #, etc.			5. Certificate of S	tatus Desired		\$8.75 A	
Oity & State	·		City &	State			6. Election Camp	Ç Ç		\$5.00	
7ip	Co	ountry	28 Zip		Count	trv	Trust Fund Cor 8. This corporation			Added to	
, 	25		29		30		Florida Statute	s 🥻	Yes 🗋 t	No	100.002,
WH	9. Name and A	ddress of Current I	Registered A	gent	B	1 Name	10. Name and Ad	dress of New He	gistered Age	ant	
515	W OTATE DOLE										
SUIT	W STATE ROAD TE 206 IGWOOD EL 327				6		dress (P.O. Box Numbe	r is Not Acceptat		<u></u>	
SUIT LON	E 206 GWOOD FL 327	50 Sections 607.0502 :	and 607.1508 f Florida, Such	3, Florida Statu h change was	B Ites, the abc	City			FL	35 Zip C anging its tment as	
SUIT LON Pursuant to office or re agent. 1 an NATURE	E 208 GWOOD FL 327 o the provisions of egistered agent, or n familiar with, and	50	and fit c if applicat	on 607.0505, F	B utes, the abc authorized lorida Statut	13 14 City Dive-named co by the corpora tes.	rporation submits this s ation's board of directo		FL for the appoin	langing its tment as i	egistered
SUIT LON Pursuant to office or re agent. 1 an NATURE	E 208 GWOOD FL 327 o the provisions of egistered agent, or n familiar with, and Signature hypertocontile	50 Sections 607.0502 i bolh, in the State of Laccopt the obligation of FICERS AND	and the it applicat DIRECTORS	on 607.0505, F	B Utes, the abc s authorized iorida Statut 13. 1.1 TILL 1.1 TILL	City City Devenamed co by the corporates. Agent signature req	rporation submits this s ation's board of directo	tatement for the p rs. I hereby accept	FL f purpose of ch pt the appoin DATE CERS AND D	langing its tment as i	egistered
SUIT LON Pursuant It office or re agont. 1 am NATURE	E 208 GWOOD FL 327 o the provisions of egistered agent, or n familiar with, and Signature types or public P WHITTINGTON	50 Sections 607.0502 a bolti, in the State of accept the obligation of Fice RS AND OFFICE RS AND	and the it applicat DIRECTORS	on 607.0505, F	B autes, the abc authorized iorida Statut DTE Registered A 13. 1.1 TiTLI 1.2 NAM	City City Dye-named co by the corporates. Agent signature req	rporation submits this s ation's board of directo	tatement for the p rs. I hereby accept	FL f purpose of ch pt the appoin DATE CERS AND D	anging its tment as	s registered registered S IN 12
SUIT LON Pursuant It office or re agont. 1 an NATURE T ADDRESS	E 208 GWOOD FL 327 o the provisions of egistered agent, or n familiar with, and Signature hypertocontile	50 Sections 607.0502 i bolti, in the State of accept the obligati drawle of registered agent OFFICERS AND OFFICERS AND I, EDWARD C M.D RD 434 #206	and the it applicat DIRECTORS	on 607.0505, F	B Jtes, the aboc authorized forida Statut 3TE Registered A 13. 1.1 TITL 1.2 NAM 1.3 STR	City City Devenamed co by the corporates. Agent signature req	rporation submits this s ation's board of directo	tatement for the p rs. I hereby accept	FL f purpose of ch pt the appoin DATE CERS AND D	anging its tment as	s registered registered S IN 12
	E 208 GWOOD FL 327 o the provisions of egistered agent, or n familiar with, and Stimature typesfor public P WHITTINGTON 515 W STATE	50 Sections 607.0502 i bolti, in the State of accept the obligati drawle of registered agent OFFICERS AND OFFICERS AND I, EDWARD C M.D RD 434 #206	and the it applicat DIRECTORS	on 607.0505, F	B Utes, the aboc authorized torica Statut 13. 1.1 Titul 1.2 NAM 1.3 STRE 1.4 CITY 2.1 Titul	Agent signature req E AE E AE E AE E E A E E A E E A E E A D R E E A D R E E	rporation submits this s ation's board of directo	tatement for the p rs. I hereby accept	FL 4 Durpose of ch pt the appoin DATE DATE DATE	anging its tment as	registered registered 3 IN 12
SUIT LON Pursuant It office or re agont. 1 an NATURE 1 ADDRESS 51-ZP	E 208 GWOOD FL 327 o the provisions of egistered agent, or n familiar with, and Stimature typesfor public P WHITTINGTON 515 W STATE	50 Sections 607.0502 i bolti, in the State of accept the obligati drawle of registered agent OFFICERS AND OFFICERS AND I, EDWARD C M.D RD 434 #206	and the it applicat DIRECTORS	n 607.0505, F	B Jtes, the abc s authorized forida Statut 13. 1.1 Title 1.2 NAM 1.3 STRE 1.4 CITY 2.1 Title 2.2 NAM		rporation submits this s ation's board of directo	tatement for the p rs. I hereby accept	FL 4 Durpose of ch pt the appoin DATE DATE DATE	IRECTOR	s registered registered S IN 12
SUIT LON Pursuant It office or re agont. 1 an NATURE T ADDRESS SI-ZIP	E 208 GWOOD FL 327 o the provisions of egistered agent, or n familiar with, and Stimature typesfor public P WHITTINGTON 515 W STATE	50 Sections 607.0502 i bolti, in the State of accept the obligati drawle of registered agent OFFICERS AND OFFICERS AND I, EDWARD C M.D RD 434 #206	and the it applicat DIRECTORS	DELETE	B utes, the abc s authorized forica Statut 13. 1.1 Title 1.2 NAM 1.3 STRE 1.4 CITY 2.1 Title 2.2 NAM 2.3 STRE	Agent signature req E AE E AE E AE E E A E E A E E A E E A D R E E A D R E E	rporation submits this s ation's board of directo	tatement for the p rs. I hereby accept	FL burpose of ch pt the appoin DATE CERS AND DI	IRECTOR	S IN 12
SUIT LON Pursuant It office or re agont. 1 an NATURE T ADDRESS SI-ZIP	E 208 GWOOD FL 327 o the provisions of egistered agent, or n familiar with, and Stimature typesfor public P WHITTINGTON 515 W STATE	50 Sections 607.0502 i bolti, in the State of accept the obligati drawle of registered agent OFFICERS AND OFFICERS AND I, EDWARD C M.D RD 434 #206	and the it applicat DIRECTORS	n 607.0505, F	B utes, the abc s authorized foricla Statut 13. 1.1 Title 1.2 NAM 1.3 STRE 1.4 CITY 2.1 Title 2.2 NAM 2.3 STRE 2.4 CITY 3.1 TITLE	B3 City Dove-named coi by the corporates. Agent signature req E E E E E E E ADDRESS (-ST-ZIP E ADDRESS Y-ST-ZIP E	rporation submits this s ation's board of directo	tatement for the p rs. I hereby accept	FL burpose of ch pt the appoin DATE CERS AND DI	IRECTOR	s registered registered S IN 12
SUIT LON Pursuant It office or re agont. 1 an NATURE T ADDRESS SI-ZIP	E 208 GWOOD FL 327 o the provisions of egistered agent, or n familiar with, and Stimature typesfor public P WHITTINGTON 515 W STATE	50 Sections 607.0502 i bolti, in the State of accept the obligati drawle of registered agent OFFICERS AND OFFICERS AND I, EDWARD C M.D RD 434 #206	and the it applicat DIRECTORS	DELETE	B utes, the abc s authorized forida Statut 13. 1.1 TITL 1.2 NAM 1.3 STRE 1.4 CITY 2.1 TITL 2.2 NAM 2.3 STRE 2.4 CITY 3.1 TITL 3.2 NAM	B3 City Dove-named coi by the corporates. Agent signature req E E E E E E E ADDRESS (-ST-ZIP E ADDRESS Y-ST-ZIP E	rporation submits this s ation's board of directo	tatement for the p rs. I hereby accept	FL burpose of ch pt the appoin DATE CERS AND DI	IRECTOR	S IN 12
Pursuant to office or re agent. 1 an NATURE T ADDRESS ST-ZIP T ADDRESS ST ZIP 1 ADDRESS	E 208 GWOOD FL 327 o the provisions of egistered agent, or n familiar with, and Stimature typesfor public P WHITTINGTON 515 W STATE	50 Sections 607.0502 i bolti, in the State of accept the obligati drawle of registered agent OFFICERS AND OFFICERS AND I, EDWARD C M.D RD 434 #206	and the it applicat DIRECTORS	DELETE	B Jtes, the abo authorized iorida Statut 13. 1.1 TITLI 1.2 NAM 1.3 STRE 1.4 CITY 2.1 TITLI 2.2 NAM 2.3 STRE 2.4 CITY 3.1 TITLI 3.2 NAM 3.3 STRE		rporation submits this s ation's board of directo	tatement for the p rs. I hereby accept	FL &	IRECTOR Change	s registered registered S IN 12 Addition
SUIT LON Pursuant to office or re agent 1 an NATURE T ADDRESS ST-ZIP 1 ADDRESS ST-ZIP 1 ADDRESS ST-ZIP	E 208 GWOOD FL 327 o the provisions of egistered agent, or n familiar with, and Stimature typesfor public P WHITTINGTON 515 W STATE	50 Sections 607.0502 i bolti, in the State of accept the obligati drawle of registered agent OFFICERS AND OFFICERS AND I, EDWARD C M.D RD 434 #206	and the it applicat DIRECTORS	DELETE	B Jtes, the abo authorized iorida Statut 3TE Registered A 13. 1.1 THL 1.2 NAM 1.3 STRE 1.4 CITY 2.1 TIFL 2.2 NAM 2.3 STRE 3.2 CITY 3.1 TIFL 3.2 NAM 3.3 STRE 3.4 CITY 4.1 TIFL	B3 B4 City Dve-named coil by the corporates. Agent signature requires. Agent signature requires. E AE EET ADDRESS Y-ST-ZIP E E E	rporation submits this s ation's board of directo	tatement for the p rs. I hereby accept	FL &	IRECTOR	S IN 12
SUIT LON Pursuant lo office or re agont. 1 an NATURE T ADDRESS SE-ZIP T ADDRESS SE-ZIP T ADDRESS SE-ZIP T ADDRESS SE-ZIP	E 208 GWOOD FL 327 o the provisions of egistered agent, or n familiar with, and Stimature typesfor public P WHITTINGTON 515 W STATE	50 Sections 607.0502 i bolti, in the State of accept the obligati drawle of registered agent OFFICERS AND OFFICERS AND I, EDWARD C M.D RD 434 #206	and the it applicat DIRECTORS	DELETE	B Jtes, the abo authorized iorida Statut 3TE Registered A 13. 1.1 Titl. 1.2 NAM 1.3 STRE 1.4 CITY 2.1 Titl. 2.2 NAM 2.3 STRE 2.4 CITY 3.1 Titl. 3.2 NAM 3.3 STRE 3.4 CITY 4.1 TITL. 4.2 NAM	B3 B4 City Dve-named coil by the corporates. Agent signature requires. Agent signature requires. E AE EET ADDRESS Y-ST-ZIP E E E	rporation submits this s ation's board of directo	tatement for the p rs. I hereby accept	FL &	IRECTOR Change	s registered registered S IN 12 Addition
SUIT LON Porsuant to office or re agont. 1 an NATURE T ADDRESS SE-ZIP T ADDRESS SE-ZIP T ADDRESS SE-ZIP T ADDRESS	E 208 GWOOD FL 327 o the provisions of egistered agent, or n familiar with, and Stimature typesfor public P WHITTINGTON 515 W STATE	50 Sections 607.0502 i bolti, in the State of accept the obligati drawle of registered agent OFFICERS AND OFFICERS AND I, EDWARD C M.D RD 434 #206	and the it applicat DIRECTORS	DELETE	B Jtes, the abo authorized iorida Statut 3TE Registered A 13. 1.1 Titl. 1.2 NAM 1.3 STRE 1.4 CITY 2.1 Titl. 2.2 NAM 2.3 STRE 2.4 CITY 3.1 TITL 3.2 NAM 3.3 STRE 3.4 CITY 4.1 TITL 4.2 NAA 4.3 STRE 4.4 CITY	33 34 City Dve-named coid by the corporates. Agent signature requires. Agent signature requires. Agent signature requires. Agent signature requires. E AE EET ADDRESS (-ST-ZIP) E AE EET ADDRESS Y-ST-ZIP E AE EET ADDRESS Y-ST-ZIP E ME EET ADDRESS Y-ST-ZIP E ME EET ADDRESS Y-ST-ZIP	rporation submits this s ation's board of directo	tatement for the p rs. I hereby accept	FL 4 Durpose of ch pt the appoin DATE DERS AND DI	IRECTOR Change	a registered registered a registered a registered b regi
SUIT LON Pursuant to office or re agont. 1 an NATURE T ADDRESS SI-ZIP T ADDRESS SI-ZIP T ADDRESS SI-ZIP T ADDRESS SI-ZIP T ADDRESS SI-ZIP	E 208 GWOOD FL 327 o the provisions of egistered agent, or n familiar with, and Stimature typesfor public P WHITTINGTON 515 W STATE	50 Sections 607.0502 i bolti, in the State of accept the obligati drawle of registered agent OFFICERS AND OFFICERS AND I, EDWARD C M.D RD 434 #206	and the it applicat DIRECTORS	DELETE	B Jtes, the abo authorized iorida Statut DTE Registered A 13. 1.1 Titlet 1.2 NAM 1.3 STRE 1.4 CITY 2.1 Titlet 2.2 NAM 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAM 3.3 STRE 3.4 CITY 4.1 TITLE 4.2 NAM 4.3 STRE 4.4 CITY 5.1 TITLE	B3 B4 City Dve-named coid by the corporates. Agent signature requests Agent signature requests E AE EET ADDRESS (-ST-ZIP) E AE EET ADDRESS Y-ST-ZIP E AE EET ADDRESS Y-ST-ZIP E AE EET ADDRESS Y-ST-ZIP E ME EET ADDRESS Y-ST-ZIP E ME EET ADDRESS Y-ST-ZIP E ME EET ADDRESS Y-ST-ZIP E	rporation submits this s ation's board of directo	tatement for the p rs. I hereby accept	FL 4 Durpose of ch pt the appoin DATE DERS AND DI	IRECTOR Change	s registered registered S IN 12 Addition
SUIT LON	E 208 GWOOD FL 327 o the provisions of egistered agent, or n familiar with, and Stimature typesfor public P WHITTINGTON 515 W STATE	50 Sections 607.0502 i bolti, in the State of accept the obligati drawle of registered agent OFFICERS AND OFFICERS AND I, EDWARD C M.D RD 434 #206	and the it applicat DIRECTORS	DELETE	B Jtes, the abc s authorized forica Statut 12 NAM 13 STRE 14 CITY 21 TITLI 22 NAM 23 STRE 24 CITY 31 TITLI 32 NAM 33 STRE 34 CITY 4.1 TITLI 4.2 NAM 4.3 STRE 34 CITY 5.1 TITLI 5.2 NAM		rporation submits this s ation's board of directo	tatement for the p rs. I hereby accept	FL 4 Durpose of ch pt the appoin DATE DERS AND DI	IRECTOR Change	a registered registered a registered a registered b regi
SUIT LON Pursuant to office or re agont. 1 an NATURE T ADDRESS SI-ZIP T ADDRESS SI-ZIP T ADDRESS SI-ZIP T ADDRESS SI-ZIP T ADDRESS	E 208 GWOOD FL 327 o the provisions of egistered agent, or n familiar with, and Stimature typesfor public P WHITTINGTON 515 W STATE	50 Sections 607.0502 i bolti, in the State of accept the obligati drawle of registered agent OFFICERS AND OFFICERS AND I, EDWARD C M.D RD 434 #206	and the it applicat DIRECTORS	DELETE	B Jtes, the abc seuthorized iorida Statut 1.1 Titu 1.2 NAM 1.3 STRE 1.4 CITY 2.1 TITL 2.2 NAM 2.3 STRE 2.4 CITY 3.1 TITL 3.2 NAM 3.3 STRE 3.4 CITY 4.1 TITL 4.2 NAM 4.3 STRE 3.4 CITY 5.1 TITL 5.2 NAM 5.3 STRE	B3 B4 City Dve-named coid by the corporates. Agent signature requests Agent signature requests E AE EET ADDRESS (-ST-ZIP) E AE EET ADDRESS Y-ST-ZIP E AE EET ADDRESS Y-ST-ZIP E AE EET ADDRESS Y-ST-ZIP E ME EET ADDRESS Y-ST-ZIP E ME EET ADDRESS Y-ST-ZIP E ME EET ADDRESS Y-ST-ZIP E	rporation submits this s ation's board of directo	tatement for the p rs. I hereby accept	FL 4 Durpose of ch pt the appoin DATE DERS AND DI	IRECTOR: IRECTOR: Change Change Change	a registered egistered a gistered a gistered a gistered b gistere
SUIT LON Pursuant to office or re agont. 1 an NATURE 1 ADDRESS SI-7/P 1 ADDRESS SI-7/P 1 ADDRESS SI-7/P 1 ADDRESS SI-7/P 1 ADDRESS SI-7/P	E 208 GWOOD FL 327 o the provisions of egistered agent, or n familiar with, and Stimature typesfor public P WHITTINGTON 515 W STATE	50 Sections 607.0502 i bolti, in the State of accept the obligati drawle of registered agent OFFICERS AND OFFICERS AND I, EDWARD C M.D RD 434 #206	and the it applicat DIRECTORS	DELETE	Ites, the abc seuthorized iorida Statut 11 12 13 1.1 1.2 1.3 1.1 1.2 1.3 1.4 1.2 1.3 1.4 1.2 1.3 1.4 1.3 2.4 2.4 2.4 2.4 3.1 3.1 3.2 3.3 3.3 3.4 4.1 5.1 5.2 5.3 5.4 5.4 6.1	B3 B3 B4 City Dve-named copy by the corporates. Agent signature requires E AE EET ADDRESS Y-ST-ZIP E AE EET ADDRESS Y-ST-ZIP E AE EET ADDRESS Y-ST-ZIP E ME EET ADDRESS Y-ST-ZIP E AE EET ADDRESS Y-ST-ZIP E ME EET ADDRESS Y-ST-ZIP E AE EET ADDRESS Y-ST-ZIP E	rporation submits this s ation's board of directo	tatement for the p rs. I hereby accept	FL 4 Durpose of ch pt the appoin DATE DERS AND DI	IRECTOR: IRECTOR: Change Change Change	a registered registered a registered a registered b regi
SUIT LON Pursuant to office or re agont. 1 an NATURE T ADDRESS SL-ZIP 1 ADDRESS SL-ZIP 1 ADDRESS SL-ZIP 1 ADDRESS SL-ZIP 1 ADDRESS SL-ZIP	E 208 GWOOD FL 327 o the provisions of egistered agent, or n familiar with, and Stimature typesfor public P WHITTINGTON 515 W STATE	50 Sections 607.0502 i bolti, in the State of accept the obligati drawle of registered agent OFFICERS AND OFFICERS AND I, EDWARD C M.D RD 434 #206	and the it applicat DIRECTORS	DELETE	Ites, the abc sauthorized iorida Statut 11 11 12 13 1.1 1.2 1.3 1.1 1.2 1.3 1.4 1.3 1.4 2.1 2.1 2.1 2.1 2.1 2.2 2.3 2.4 2.4 2.4 3.3 3.4 3.3 3.4 4.1 4.2 3.3 3.3 5.1 5.2 3.3 5.3 5.4 6.1 101 6.2	B3 B4 City Dve-named coidy the corporates. Agent signature requires. Agent signature requires. E AE EET ADDRESS (-ST-ZIP) E AE EET ADDRESS (-ST-ZIP) E AE EET ADDRESS Y-ST-ZIP E ME EET ADDRESS Y-ST-ZIP E ME EET ADDRESS Y-ST-ZIP E ME EET ADDRESS Y-ST-ZIP E AE EET ADDRESS Y-ST-ZIP E AE	rporation submits this s ation's board of directo	tatement for the p rs. I hereby accept	FL &	IRECTOR: IRECTOR: Change Change Change	a registered egistered a gistered a gistered a gistered b gistere
SUIT LON Pursuant to office or re agent. 1 an NATURE	E 208 GWOOD FL 327 o the provisions of egistered agent, or n familiar with, and Stimature typesfor public P WHITTINGTON 515 W STATE	50 Sections 607.0502 i bolti, in the State of accept the obligati drawle of registered agent OFFICERS AND OFFICERS AND I, EDWARD C M.D RD 434 #206	and the it applicat DIRECTORS	DELETE	Ites, the abore authorized is authorized is a statut Iter, the abore authorized is a statut Iter, and the authorized is a stat	B3 B3 B4 City Dve-named copy by the corporates. Agent signature requires E AE EET ADDRESS Y-ST-ZIP E AE EET ADDRESS Y-ST-ZIP E AE EET ADDRESS Y-ST-ZIP E ME EET ADDRESS Y-ST-ZIP E AE EET ADDRESS Y-ST-ZIP E ME EET ADDRESS Y-ST-ZIP E AE EET ADDRESS Y-ST-ZIP E	rporation submits this s ation's board of directo	tatement for the p rs. I hereby accept	FL &	IRECTOR: IRECTOR: Change Change Change	a registered egistered a gistered a gistered a gistered b gistere