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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

NAME ALLISON, JOSEPH G 12 NAME 2020-16 W. PENSACOLA STREET 13 STREET ADDRESS CITY ST-ZIP TALLAHASSEE FL 32304 14 CITY-ST-ZIP TILE	ANNUAL REPORT 1997		Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		Secretary of State			
220-16 W. PENSACOLA STREET TALLAHASSEE R. 3204 2. Principal Place of Business. 2. Making Address 3. Date Incorporated or Qualified 33. Date Incorporated or Qualified 34. FEI Number 58-1951294 Suite, Apr. #. etc. 58-1951294 Suite, Apr. #. etc. 27 Country 58. Centricate of Status Desired 79 Country 70 Country 8. Since controlled on Status Desired 70 Fee Required 70 Foods Status 28 Suite, Apr. #. etc. 29 Suite, Apr. #. etc. 20 Country 70 Country 8. Since controlled on Institute Desired 8. Deterior Compagn Finencing 74 P Country 75 P Country 8. Since controlled on Institute Desired 8. Deterior Compagn Finencing 74 P Country 75 P Country 8. Since controlled on Institute Desired 8. Deterior Compagn Finencing 74 P Country 8. Since controlled on Institute Desired 8. Deterior Compagn Finencing 74 P Country 75 P Country 8. This corporation has liability for intenptible at under s 1991 Action Institute Desired 8. Deterior Compagn Finencing 75 Poods Status 8. Deterior Compagn Finencing 75 Poods Status 8. Deterior Compagn Finencing 75 Poods Status 8. Deterior Compagn Finencing 8. This corporation has liability for intenptible at under s 1991 8. Name 8. Allison, Joseph G. 822 Street Address (P.O. Box Number is Not Acceptable) 82 Street Address (P.O. Box Number is Not Acceptable) 83 Sept. Allison 84 Cty 85 Poods 85 Poods 86 Cty 86 Cty 87 Poods 88 Sept. Address 89 Poods 80 Poods	POCUI 1. Corporation	MENT # ;	S34994	(1)			yl 870yl 818ly 818ll dinil Bidir I	NATALI ARRI
2. Principal Flore of Bourness	2020-16 W. PE	ENSACOLA STREET		2020-16 W. PENSACOLA		-		
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City & State City & Country City Trust Fund Contribution Added to Fee City & City	Suite, Apt	#, etc			***************************************		\$8.75 AC	dditional
28	City & Stat	е					Fee Req	
9. Name and Address of Current Registered Agent ALLISON, JOSEPH G. 2020-16 WEST PENSACOLA TALLAHASSEE FL 32304 10. Name and Address of New Registered Agent B2 Sirvert Address (P.O. Box Number is Not Acceptable) 11. Foresant to the prover one of Sections 607 0502 and 607 1508, Florida Statutes, the abovernamed corporation submitted statement for the purpose of changing at segment. The terminal with, and accept the obligations of, Section 607 0505, Florida Statutes, and the abovernamed corporation submitted that the appointment as registered agent. The terminal with, and accept the obligations of, Section 607 0505, Florida Statutes SIGNATURE 12. OFFICERS AND DIRECTORS IN 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 14. OTHER STATUTE 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 16. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 17. SI-72P 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 19. ALLISON, JOSEPH G. 2020-16 W. PENSACOLA STREET 19. DELETE 21. TITLE 22. WE 22. WE 23. RET ADDRESS 24. TY-51-72P 19. DELETE 35. RET ADDRESS 26. TY-51-72P 19. DELETE 36. WE 37. STREET ADDRESS 38. WE 39. STREET ADDRESS 30. STREET ADDRESS 30. STREET ADDRESS 31. STREET ADDRESS 32. TY-51-72P 33. RET ADDRESS 34. STREET ADDRESS 35. STREET ADDRESS 36. STREET ADDRESS 36. STREET ADDRESS 37. STREET ADDRESS 38. STREET ADDRESS 39. STREET ADDRESS 30. STREET ADDRESS 30. STREET ADDRESS 30. STREET ADDRESS 31. STREET ADDRESS 32. STREET ADDRESS 33. RET ADDRESS 34. STREET ADDRESS 35. STREET ADDRESS 36. STREET ADDRESS 37. STREET ADDRESS 38. STREET ADDRESS 39. STREET ADDRESS 3				28				
9. Name and Address of Current Registered Agent ALLISON, JOSEPH G. 2020-16 WEST PENSACOLA TALLAHASSEE R. 32304 82 Sireet Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code 11. Fires, and to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its regist officer or registered agreet, or both in the State of Floridas Such change was authorized by the corporation's board of directors. Thereby accept the appointment as regist officer or registered agreet, or both in the State of Floridas Such change was authorized by the corporation's board of directors. Thereby accept the appointment as regist officer or registered agreet ag	Zip	ê	· · · · · · · · · · · · · · · · · · ·	¬ '	·	1		199.032,
2020-16 WEST PENSACOLA TALLAHASSEE FL 32304 82 Street Address (P.O. Box Number is Not Acceptable) 11. Fursuant to the provisions of Sections 607 5502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN DIRECTO	24	A SECTION ASSESSMENT AND ADDRESS OF A SECTION ASSESSMENT ASSESSMENT AND ADDRESS OF A SECTION ASSESSMENT ASSESSME			1301			
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FL II. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as regist agent, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE SIGNATURE OFFICERS AND DIRECTORS DELETE 13 TILL P ALLISON, JOSEPH G 2020-16 W. PENSACOLA STREET TALLAHASSEE FL 32304 14 ONY-51-ZIP THE DELETE 21 TILL DELETE 21 TILL Change Change CH-SI-ZIP THE DELETE 31 LE MMA 32 WE SIRRET ADDRESS CITY-SI-ZIP THE DELETE 33 LET ADDRESS CITY-SI-ZIP THE DELETE 34 LE Change CHA					84 City		85 Zin C	ode
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SIGNATURE	office or a	registered agent, or	both in the State of F	lorida. Such change was:	authorized by the corpora	ation's board of directors. I hereby acception	of the appointment as re	egistered
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14. I do hereby certify that 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 indicated on this armual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under or	14. 1 do here!				ify for the exemption state			

SIGNATURE:

THE AND TYPE OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR HL QUINED

FILED

Apr 18 1997 8:00am