## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

appears in Block 12 or Block

PROFIT For the first has FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 97 SEP 17 PM 1: 08 1997 DIVISION OF CORPORATIONS SECREDARY OF STATE TALL AHASSEE FLORIDA DOCUMENT # S40775 (6)CANOPY ROADS MANAGEMENT, INC. Mailing Address Principal Place of Business N. Badubughtoo thomasville no P.O. Box 37354 Tallahassee fl 9000 32815 <del>1700 THOMACVILLE NO</del> 1352 TALLAHASSEE FL 32303 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3a. Date of Last Report <u>03/26/1991</u> 05/01/1996 2. Principal Place of Bus 4. FEI Number Applied For 1382 N.L 59-3060724 Not Applicable \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 \$5.00 May Be 6. Election Campaign Financing  $\Box$ Trust Fund Contribution Added to Fees 23 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Z Yes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name WOODWARD, ANNE M 4700 THOMASVILLE RD Street Andress (P.O. Box Amber is Not Acceptable) 82 TALLAHASSEE FL 32303 83 84 11. 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 office or 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. Lam familiar with, and accept the obligations of, Section 607.0506, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition 1.1 TITLE TITLE WOODWARD, ANNE M. 1.2 NAME NAME 1332 N. BROWNIEL ST 1796 THOMASVILLE RD 1.3 STREET ADDRESS STREET ADDRESS TALLAHASSEE FL 1.4 City - St - ZiP CITY-ST-ZIP Change Addition DELETE 21 THILE TITLE WOODWARD, FRANCIS A 2.2 NAME NAME 1832 N. BLONOVAL ST 1796 THOMASVILLE ROAD STREET ADDRESS 2.3 STREET ADDRESS TALLAHASSEE FL CITY-ST-ZIP 2 4 CITY - ST - ZIF ☐ Change ☐ Addition TITLE 31 111LE WOODWARD BRIDGETTE M NAME 32 NAME 1000022960**01--**6 1706 THOMASVILLE PIB -09/17/97--01091---017 3.3 STREET ADDRESS STREET ADDRESS TALLAHAGGEE FL 3 4. CITY-ST-ZIP \*\*\*\*165.00 \*\*\*\*165.00 CITY-ST-ZIP 41 HILE TITLE WOODWARD MICHAEL TODD NAME 4 2 NAME 1790 THOMASVILLE RD STREET ADDRESS 4.3 STREET ADDRESS TALLAHAGGEE FL 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 51 TITLE TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP Addition DELETE Change 6.1 TITLE TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 64 CITY-ST-ZIP CITY - ST - Z(P 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 the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under path; 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

climent with an address.

9/11/00





September 17, 1997

Division of Corporations P.O. Box 6327 Tallahassee, Fl 32314

To Whom it may concern;

I am enclosing a check to you in the amount of \$165.00. I moved my office in December of 1995 and did not receive the first notice. Also due to a family emergency I have been out of my office for the past seven weeks.

In the years I have been in business this is the first time I have not received notification. My new address is reflected on your form.

Sincerely,

Anne M. Woodward Broker/President

V. Weshward