



DEPARTMENT OF GROWTH MANAGEMENT
205 North Marion Avenue
Lake City, Florida 32055
Telephone: (386) 719-5750
growthmanagement@lcfla.com

Florida Statute 166.0415
Effective July 01, 2021

Code Enforcement Complaint Form

Date of complaint: Feb. 13, 2025 Name (required) Marshall Sova
Phone: (386)719-5746 Address: 205 N. Marion Ave Lake City, FL 32055 Email: _____

Do you wish to be contacted about this complaint? ☒ Yes ☐ No Best Time To Call: _____
Address of Complaint: 341 N Marion Avenue Nature
of Complaint: Unsafe conditions, missing parts of roof and missing windows

How
long has the complaint been going on? Unknown Do you know
who the person(s) involved are? ☒ Yes ☐ No If yes, who? Compassion Love Center Inc Do you know the time
frames that the complaint is happening? ☒ Yes ☐ No If yes, when? Now Is there any other information
that you would like to us to know?

**** Below Internal Use Only ****

Date Received: Feb. 13, 2025 Via: Person Case Number Assigned 25-00000033
Notes:

Case Data Sheet for case # 25-00000033

Parcel# 12020-000

Address: 341 N Marion Ave

Owner: Compassion Love Center Inc

Date of first inspection: 2/13/2025

1st Notice of Violation sent: 2/14/2025

2nd inspection date: _____

2nd Notice of Violation sent: _____

Date of Public Notice placed on property: _____

Notice of Mag. Hearing sent: _____

Notice on City of Lake City website on: _____

Notice posted in City Hall:

Mailing Cost/Date: \$9.64 02/14/2025

Mailing Cost/Date: _____

Mailing Cost/Date: _____

Total Mailing Cost: _____



Marshall Sova CEO/ City of Lake City

Columbia County Property Appraiser

Jeff Hampton

2025 Working Values

updated: 2/6/2025

Parcel: 00-00-00-12020-000 (40605)

Owner & Property Info

Result: 64 of 202

Owner	COMPASSION LOVE CENTER INC PO BOX 3785 LAKE CITY, FL 32056		
Site	341 N MARION AVE, LAKE CITY		
Description*	N DIV: ALL BLOCK 82 EX BEG SE COR, W 114.30 FT, N 50.90 FT, E 114.30 FT, S 50.90 FT TO POB & EX THE N 80 FT AS DESC ORB 878-1206, 739-325, 845-1937, QC 1119-647, QC 1472-555, AG 1476-1593		
Area	0.5 AC	S/T/R	29-3S-17
Use Code**	STORES/1 STORY (1100)	Tax District	1

*The Description above is not to be used as the Legal Description for this parcel in any legal transaction.

**The Use Code is a FL Dept. of Revenue (DOR) code and is not maintained by the Property Appraiser's office. Please contact your city or county Planning & Zoning office for specific zoning information.

Property & Assessment Values

2024 Certified Values		2025 Working Values	
Mkt Land	\$74,059	Mkt Land	\$74,059
Ag Land	\$0	Ag Land	\$0
Building	\$50,682	Building	\$50,682
XFOB	\$1,400	XFOB	\$1,400
Just	\$126,141	Just	\$126,141
Class	\$0	Class	\$0
Appraised	\$126,141	Appraised	\$126,141
SOH/10% Cap	\$0	SOH/10% Cap	\$0
Assessed	\$126,141	Assessed	\$126,141
Exempt	\$0	Exempt	\$0
Total	county:\$126,141 city:\$126,141	Total	county:\$126,141 city:\$126,141
Taxable	other:\$0 school:\$126,141	Taxable	other:\$0 school:\$126,141

NOTE: Property ownership changes can cause the Assessed value of the property to reset to full Market value, which could result in higher property taxes.

Aerial Viewer Pictometry Google Maps

2023 2022 2019 2016 2013 Sales



Sales History

Sale Date	Sale Price	Book/Page	Deed	V/I	Qualification (Codes)	RCode
7/20/2022	\$0	1472 / 555	QC	I	U	11
11/18/2010	\$100	1476 / 1593	AG	I	U	30
12/21/1990	\$80,000	739 / 325	WD	I	U	12

Building Characteristics

Bldg Sketch	Description*	Year Blt	Base SF	Actual SF	Bldg Value
Sketch	STORE RETL (3500)	1920	2300	2760	\$18,928
Sketch	STORE RETL (3500)	1920	3900	3900	\$31,754

*Bldg Desc determinations are used by the Property Appraisers office solely for the purpose of determining a property's Just Value for ad valorem tax purposes and should not be used for any other purpose.

Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims
0260	PAVEMENT-ASPHALT	1993	\$1,000.00	1.00	0 x 0
0130	CLFENCE 5	1993	\$300.00	1.00	0 x 0
0285	SALVAGE	0	\$100.00	1.00	0 x 0

Land Breakdown

Code	Desc	Units	Adjustments	Eff Rate	Land Value
1100	STORE 1FLR (MKT)	21,782.000 SF (0.500 AC)	1.0000/1.0000 1.0000/.8500000 /	\$3 /SF	\$74,059

Search Result: 64 of 202

© Columbia County Property Appraiser | Jeff Hampton | Lake City, Florida | 386-758-1083

by: GrizzlyLogic.com

The information presented on this website was derived from data which was compiled by the Columbia County Property Appraiser solely for the governmental purpose of property assessment. This information should not be relied upon by anyone as a determination of the ownership of property or market value. The GIS Map image is not a survey and shall not be used in a Title Search or any official capacity. No warranties, expressed or implied, are provided for the accuracy of the data herein, its use, or its interpretation. This website was last updated: 2/6/2025 and may not reflect the data currently on file at our office.



Columbia County Property Appraiser

Jeff Hampton | Lake City, Florida | 386-758-1083

PARCEL: 00-00-00-12020-000 (40605) | STORES/1 STORY (1100) | 0.5 AC

N DIV: ALL BLOCK 82 EX BEG SE COR, W 114.30 FT, N 50.90 FT, E 114.30 FT, S 50.90 FT TO POB & EX THE N 80 FT AS
DESC ORB 878-1206, 739-325, 845-1937,

COMPASSION LOVE CENTER INC

2025 Working Values

Owner: PO BOX 3785	Mkt Lnd	\$74,059	Appraised	\$126,141
LAKE CITY, FL 32056	Ag Lnd	\$0	Assessed	\$126,141
Site: 341 N MARION AVE, LAKE CITY	Bldg	\$50,682	Exempt	\$0
Sales 7/20/2022 \$0 I(U)	XFOB	\$1,400	county:	\$126,141
Info 11/18/2010 \$100 I(U)	Just	\$126,141	city:	\$126,141
12/21/1990 \$80,000 I(U)			other:	\$0
			Taxable	school:
				\$126,141

NOTES:

Columbia County, FL



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GrizzlyLogic.com



DEPARTMENT OF GROWTH MANAGEMENT
205 North Marion Avenue
Lake City, Florida 32055
Telephone: (386) 719-5750
growthmanagement@lcfla.com

NOTICE OF VIOLATION
CODE ENFORCEMENT – SPECIAL MAGISTRATE
CASE # 25-00000033

In the name of Lake City, Florida, the undersigned Code Inspector certifies that he/she has reasonable grounds to believe and does believe that on/prior to the date below, the following violation(s) of the Codes of Lake City were violated at the property located at:

Name: **Compassion Love Center c/o Charles F Martin**
Address: **341 N. Marion Ave Lake City, FL 32055**

INITIAL INSPECTION	INITIAL INSPECTION PROMPTED BY:
Date: 02/13/2025	Complaint ____ CE Personnel Observation <u> X </u> Complainant: Marshall Sova CE Personnel: Marshall Sova

Violation Code

Violation Description

304.1 General.	The exterior of a structure shall be maintained in good repair, structurally sound and sanitary so as not to pose a threat to the public health, safety or welfare. ♦The exterior of structures must perform four primary functions: <ul style="list-style-type: none">• It must be in good repair. There should be no evidence of deterioration, or damaged or loose elements.• It must be structurally sound. There should not be any loose or collapsing pieces. Stairways, porches, balconies and similar structural elements must safely perform their intended functions.• It must be kept in a sanitary condition. There shall be no accumulation of litter or debris on porches and other parts of the exterior structure.• It must be capable of preventing the elements (rain, snow and wind) and rodents from entering the interior areas.
304.1.1 Unsafe conditions.	The following conditions shall be determined as unsafe and shall be repaired or replaced to comply with the <i>International Building Code</i> or the <i>International Existing Building Code</i> as required for existing buildings: Roofing or roofing components that have defects that admit rain, roof surfaces with inadequate drainage, or any portion of the roof framing that is not in good repair with signs of deterioration, fatigue or without proper anchorage and incapable of supporting all nominal loads and resisting all load effects.



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304.7 Roofs and drainage.	The roof and flashing shall be sound, tight and not have defects that admit rain. Roof drainage shall be adequate to prevent dampness or <i>deterioration</i> in the walls or interior portion of the structure. Roof drains, gutters and downspouts shall be maintained in good repair and free from obstructions. Roof water shall not be discharged in a manner that creates a public nuisance.

Violation Code	Corrective Action
304.1 General.	The structure needs to be brought up to the Florida Building Code or the structure needs to be demolished. The structure is unsafe due to parts of the roof missing from the structure. There are several windows that are missing and the elements of the weather is entering the structure. This is a blighting issue in the community.
304.1.1 Unsafe conditions.	The structure needs to be brought up to the Florida Building Code or the structure needs to be demolished. The structure is unsafe due to parts of the roof missing from the structure. There are several windows that are missing and the elements of the weather is entering the structure. This is a blighting issue in the community.
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WARNING: This notice constitutes a warning to discontinue the above violation, and to bring the violation into compliance on or before the date listed below:

Due date: **Attend Special Magistrate hearing August 7, 2025**_____



DEPARTMENT OF GROWTH MANAGEMENT
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Warning

If the owner of property which is subject to an enforcement proceeding before the enforcement board, or court transfers ownership of such property between the time the initial pleading was served and the time of the hearing, such owner shall:

- (1) Disclose in writing the existence and the nature of the proceedings to the prospective transferee;
- (2) Deliver to the prospective transferee a copy of the pleadings, notices, and other materials relating to the code enforcement proceedings received by the transferor;
- (3) Disclose, in writing, to the prospective transferee that the new owner will be responsible for compliance with the applicable code and with orders issued in the code enforcement proceedings;
- (4) File a notice with the code enforcement official of the transfer of the property, with the identity and address of the new owner and copies of the disclosures made to the new owner within five days after the date of the transfer.

A failure to make the disclosures described in paragraphs (1), (2) and (3) above before the transfer creates a rebuttal presumption of fraud. If the property is transferred before the hearing, the proceeding shall not be dismissed, but the new owner shall be provided a reasonable period to correct the violation before the hearing is heard.

I hereby certify that I delivered the foregoing notice to (Name of person and relationship):

Name: Compassion Love Center Inc. c/o Charles F. Martin Relationship owner: _____

On date: June 24, 2025 time being: 2:00 pm _____

Personal Service _____

Posted on property X and at City Hall X

Certified Mail, Return Receipt requested X First class mailing _____

Refused to sign _____, drop service _____

Marshall Sovia
Print Name of Code Inspector


Signature of Code Inspector



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205 North Marion Avenue
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NOTICE OF VIOLATION

CODE ENFORCEMENT – SPECIAL MAGISTRATE

CASE # 25-00000033

In the name of Lake City, Florida, the undersigned Code Inspector certifies that he/she has reasonable grounds to believe and does believe that on/prior to the date below, the following violation(s) of the Codes of Lake City were violated at the property located at:

Name: **Compassion Love Center c/o Charles F Martin**

Address: **341 N. Marion Ave Lake City, FL 32055**

INITIAL INSPECTION

INITIAL INSPECTION PROMPTED BY:

Date: **02/13/2025**

Complaint ____ CE Personnel Observation **X**
Complainant: Marshall Sova CE Personnel: Marshall Sova

Violation Code	Violation Description
304.1 General.	<p>The exterior of a structure shall be maintained in good repair, structurally sound and sanitary so as not to pose a threat to the public health, safety or welfare.</p> <p>❖The exterior of structures must perform four primary functions:</p> <ul style="list-style-type: none">• It must be in good repair. There should be no evidence of deterioration, or damaged or loose elements.• It must be structurally sound. There should not be any loose or collapsing pieces. Stairways, porches, balconies and similar structural elements must safely perform their intended functions.• It must be kept in a sanitary condition. There shall be no accumulation of litter or debris on porches and other parts of the exterior structure.• It must be capable of preventing the elements (rain, snow and wind) and rodents from entering the interior areas.
304.1.1 Unsafe conditions.	<p>The following conditions shall be determined as unsafe and shall be repaired or replaced to comply with the <i>International Building Code</i> or the <i>International Existing Building Code</i> as required for existing buildings: Roofing or roofing components that have defects that admit rain, roof surfaces with inadequate drainage, or any portion of the roof framing that is not in good repair with signs of deterioration, fatigue or without proper anchorage and incapable of supporting all nominal loads and resisting all load effects.</p>



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304.7 Roofs and drainage.	The roof and flashing shall be sound, tight and not have defects that admit rain. Roof drainage shall be adequate to prevent dampness or <i>deterioration</i> in the walls or interior portion of the structure. Roof drains, gutters and downspouts shall be maintained in good repair and free from obstructions. Roof water shall not be discharged in a manner that creates a public nuisance.

Violation Code	Corrective Action
304.1 General.	The structure needs to be brought up to the Florida Building Code or the structure needs to be demolished. The structure is unsafe due to parts of the roof missing from the structure. There are several windows that are missing and the elements of the weather is entering the structure. This is a <u>blighting</u> issue in the community.
304.1.1 Unsafe conditions.	The structure needs to be brought up to the Florida Building Code or the structure needs to be demolished. The structure is unsafe due to parts of the roof missing from the structure. There are several windows that are missing and the elements of the weather is entering the structure. This is a <u>blighting</u> issue in the community.
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WARNING: This notice constitutes a warning to discontinue the above violation, and to bring the violation into compliance on or before the date listed below:

Due date: **April 17, 2025** _____



DEPARTMENT OF GROWTH MANAGEMENT
205 North Marion Avenue
Lake City, Florida 32055
Telephone: (386) 719-5750
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Warning

If the owner of property which is subject to an enforcement proceeding before the enforcement board, or court transfers ownership of such property between the time the initial pleading was served and the time of the hearing, such owner shall:

- (1) Disclose in writing the existence and the nature of the proceedings to the prospective transferee;
- (2) Deliver to the prospective transferee a copy of the pleadings, notices, and other materials relating to the code enforcement proceedings received by the transferor;
- (3) Disclose, in writing, to the prospective transferee that the new owner will be responsible for compliance with the applicable code and with orders issued in the code enforcement proceedings;
- (4) File a notice with the code enforcement official of the transfer of the property, with the identity and address of the new owner and copies of the disclosures made to the new owner within five days after the date of the transfer.

A failure to make the disclosures described in paragraphs (1), (2) and (3) above before the transfer creates a rebuttal presumption of fraud. If the property is transferred before the hearing, the proceeding shall not be dismissed, but the new owner shall be provided a reasonable period to correct the violation before the hearing is heard.

I hereby certify that I delivered the foregoing notice to (Name of person and relationship):

Name: Compassion Love Center Inc. c/o Charles F. Martin Relationship owner: _____

On date: March 17, 2025 time being: 10:00 am _____

Personal Service _____

Posted on property _____ and at City Hall _____

Certified Mail, Return Receipt requested ☒ First class mailing _____

Refused to sign _____, drop service _____

Marshall Sova
Print Name of Code Inspector


Signature of Code Inspector



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205 North Marion Avenue
Lake City, Florida 32055
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NOTICE OF VIOLATION
CODE ENFORCEMENT – SPECIAL MAGISTRATE
CASE # 25-00000033

In the name of Lake City, Florida, the undersigned Code Inspector certifies that he/she has reasonable grounds to believe and does believe that on/prior to the date below, the following violation(s) of the Codes of Lake City were violated at the property located at:

Name: **Compassion Love Center c/o Shawn Claridy**
Address: **341 N. Marion Ave Lake City, FL 32055**

INITIAL INSPECTION	INITIAL INSPECTION PROMPTED BY:
Date: 02/13/2025	Complaint _____ CE Personnel Observation <u> X </u> Complainant: Marshall Sova CE Personnel: Marshall Sova

Violation Code

Violation Description

304.1 General.	The exterior of a structure shall be maintained in good repair, structurally sound and sanitary so as not to pose a threat to the public health, safety or welfare. ♦The exterior of structures must perform four primary functions: <ul style="list-style-type: none">• It must be in good repair. There should be no evidence of deterioration, or damaged or loose elements.• It must be structurally sound. There should not be any loose or collapsing pieces. Stairways, porches, balconies and similar structural elements must safely perform their intended functions.• It must be kept in a sanitary condition. There shall be no accumulation of litter or debris on porches and other parts of the exterior structure.• It must be capable of preventing the elements (rain, snow and wind) and rodents from entering the interior areas.
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DEPARTMENT OF GROWTH MANAGEMENT

205 North Marion Avenue

Lake City, Florida 32055

Telephone: (386) 719-5750

growthmanagement@lcfla.com

WARNING: This notice constitutes a warning to discontinue the above violation, and to bring the violation into compliance on or before the date listed below:

Due date: **March 13, 2025**



DEPARTMENT OF GROWTH MANAGEMENT
205 North Marion Avenue
Lake City, Florida 32055
Telephone: (386) 719-5750
growthmanagement@lcfla.com

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I hereby certify that I delivered the foregoing notice to (Name of person and relationship):

Name: Compassion Love Center Inc. c/o Shawn L. Claridy Relationship owner: _____

On date: February 13, 2025 time being: 10:00 am _____

Personal Service _____

Posted on property _____ and at City Hall _____

Certified Mail, Return Receipt requested ☒ First class mailing _____

Refused to sign _____, drop service _____

Marshall Sova
Print Name of Code Inspector


Signature of Code Inspector

**NOTICE OF PUBLIC HEARING
CITY OF LAKE CITY
SPECIAL MAGISTRATE HEARING**

THIS SERVES AS PUBLIC NOTICE the Special Magistrate will hold a hearing on Thursday, August 14, 2025 at 5:30 PM

Meeting Location: City Council Chambers located on the 2nd Floor of City Hall at 205 North Marion Avenue, Lake City, FL 32055.

Members of the public may also view the meeting on our YouTube channel at:

<https://www.youtube.com/c/CityofLakeCity>

Pursuant to 286.0105, Florida Statutes, the City hereby advises the public if a person decides to appeal any decision made by the City with respect to any matter considered at its meetings or hearings, he or she will need a record of the proceedings, and that, for such purpose, he or she may need to ensure that a verbatim record of the proceedings is made, which record includes the testimony and evidence upon which the appeal is to be based.

SPECIAL REQUIREMENTS: Pursuant to 286.26, Florida Statutes, persons needing special accommodations to participate in this meeting should contact the City Manager's Office at (386) 719-5768.

MARSHALL SOVA
Code Enforcement Officer

City of Lake City
205 N. Marion Ave
Lake City, Florida 32055

Respondent: Compassion Love Center c/o Charles Martin

Date _____



July 10, 2025

To whom it may concern:

The Special Magistrate hearing scheduled for August 7, 2025 at 5:30 pm has been rescheduled. The hearing will be held on August 14, 2025 at 5:30 pm. The hearing will take place at City Hall, 205 N. Marion Avenue, 2nd floor, Council Chambers Lake City, Florida.

Sincerely,

Marshall Sovo

Code Enforcement Officer



July 10, 2025

To whom it may concern:

The Special Magistrate Hearing will be held on August 14, 2025 at 5:30 pm in the City Council Chambers 2nd floor. The hearing will be heard through the Zoom platform. If you are unable to attend in person you can attend by Zoom. The City of Lake City will have the technology available for you to view the Special Magistrate hearing through Zoom and present your case to the Special Magistrate.

Join Zoom Meeting: <https://us02web.zoom.us/j/84659541815>

Meeting ID: 846 5954 1815

One tap mobile

13052241968,, 84659541815# US

13017158592,, 84659541815# US (Washington DC)

Dial by your location

1 305 224 1968 US

1 301 715 8592 US (Washington DC)

1 309 205 3325 US

1 312 626 6799 US (Chicago)

1 646 558 8656 US (New York)

1 646 931 3860 US

1 689 278 1000 US

1 719 359 4580 US

1 253 205 0468 US

1 253 215 8782 US (Tacoma)

1 346 248 7799 US (Houston)

1 360 209 5623 US

1 386 347 5053 US

1 507 473 4847 US

1 564 217 2000 US

1 669 444 9171 US

1 669 900 9128 US (San Jose)

833 548 0282 US Toll-free

877 853 5247 US Toll-free

888 788 0099 US Toll-free

833 548 0276 US Toll-free

Meeting ID: 846 5954 1815

Marshall Sova

City of Lake City

Code Enforcement Officer

(386)719-5746

sovam@lcfla.com

Code Enforcement Department • 173 NW Hillsboro St. • Lake City, Florida 32055

• T - 386-719-5746 • growthmanagement@lcfla.com

City of Lake City
205 N. Marion Ave
Lake City, Florida 32055

Case No.: 25-00000033
Respondent: Compassion Love Center c/o Charles Martin

You are hereby notified and commanded to appear before the Special Magistrate for a Code Enforcement Violation hearing on (day) Thursday the 7th day of August, 2025, at (time) 5:30 a.m./p.m.

The hearing will take place at City Hall, 205 N. Marion Ave, 2nd floor, Council Chambers, Lake City, Florida, at which time evidence and testimony will be presented to the Special Magistrate concerning the violation. You have the right to examine all evidence and to cross-examine all witnesses, and to present evidence and testimony on your behalf concerning said violation.

The Special Magistrate will be presiding over your hearing through the Zoom platform. The City of Lake City, Florida will have the technology available for you to view the Special Magistrate through Zoom and present your case to the Special Magistrate. **IF YOU HAVE ANY DOCUMENTS, RECORDS, WRITINGS, OR PHOTOGRAPH YOU WISH FOR THE SPECIAL MAGISTRATE TO REVIEW AND CONSIDER, YOU MUST PROVIDE THESE TO THE CODE INSPECTOR AT LEAST TWENTY-FOUR (24) HOURS PRIOR TO YOUR SCHEDULED HEARING.**

If you have any questions concerning your upcoming hearing, please contact the Code Inspector at (386)719-5746.

Your failure to appear at the hearing may result in a civil fine being imposed on you for said violation up to \$250.00 per day/per violation each day the violation continues.

It is the RESPONSIBILITY of the RESPONDENT to schedule a Compliancy inspection.

This case will not go before the Special Magistrate if the violation(s) are brought into compliance in accordance with the Notice of Violation.

I hereby certify that I delivered the foregoing notice to (Name of person and relationship):

Name Compassion Love Center c/o Charles Martin Relationship Owner
On date June 24, 2025 time being 2:00 pm
☐ Personal Service ☒ Posted on property and at City Hall
☒ Certified Mail, Return Receipt requested ☐ First class mailing
☐ Refused to sign, drop service

Marshall Sova

Print Name of Code Inspector


Signature of Code Inspector

I acknowledge receipt of a copy of this Notice of Hearing

Signature of Respondent/Recipient

Date _____

City of Lake City
205 N. Marion Ave
Lake City, Florida 32055

Case No.: 25-00000033
Respondent: Compassion Love Center c/o Charles Martin

You are hereby notified and commanded to appear before the Special Magistrate for a Code Enforcement Violation hearing on (day) Thursday the 7th day of August, 2025, at (time) 5:30 a.m. p.m.


The hearing will take place at City Hall, 205 N. Marion Ave, 2nd floor, Council Chambers, Lake City, Florida, at which time evidence and testimony will be presented to the Special Magistrate concerning the violation. You have the right to examine all evidence and to cross-examine all witnesses, and to present evidence and testimony on your behalf concerning said violation.

If you have any questions concerning your upcoming hearing, please contact the Code Inspector at (386)719-5746.

Your failure to appear at the hearing may result in a civil fine being imposed on you for said violation up to \$250.00 per day/per violation each day the violation continues.

This case will not go before the Special Magistrate if the violation(s) are brought into compliance in accordance with the Notice of Violation.

Name	Compassion Love Center c/o Charles Martin	Relationship	Owner
On date	June 24, 2025	time being	2:00 pm
<input type="checkbox"/> Personal Service <input checked="" type="checkbox"/> Certified Mail, Return Receipt requested <input type="checkbox"/> Refused to sign, drop service		<input checked="" type="checkbox"/> Posted on property and at City Hall <input type="checkbox"/> First class mailing	


Signature of Code Inspector

Signature of Respondent/Recipient

Date _____



June 24, 2025

To whom it may concern:

The Special Magistrate Hearing will be held on June 5, 2025 at 5:30 pm in the City Council Chambers 2nd floor. The hearing will be heard through the Zoom platform. If you are unable to attend in person you can attend by Zoom. The City of Lake City will have the technology available for you to view the Special Magistrate hearing through Zoom and present your case to the Special Magistrate.

Join Zoom Meeting: <https://us02web.zoom.us/j/84659541815>

Meeting ID: 846 5954 1815

One tap mobile

13052241968,, 84659541815# US

13017158592,, 84659541815# US (Washington DC)

Dial by your location

1 305 224 1968 US

1 301 715 8592 US (Washington DC)

1 309 205 3325 US

1 312 626 6799 US (Chicago)

1 646 558 8656 US (New York)

1 646 931 3860 US

1 689 278 1000 US

1 719 359 4580 US

1 253 205 0468 US

1 253 215 8782 US (Tacoma)

1 346 248 7799 US (Houston)

1 360 209 5623 US

1 386 347 5053 US

1 507 473 4847 US

1 564 217 2000 US

1 669 444 9171 US

1 669 900 9128 US (San Jose)

833 548 0282 US Toll-free

877 853 5247 US Toll-free

888 788 0099 US Toll-free

833 548 0276 US Toll-free

Meeting ID: 846 5954 1815

Marshall Sova

City of Lake City

Code Enforcement Officer

(386)719-5746

sovam@lcfla.com







2/13/25



2/13/25

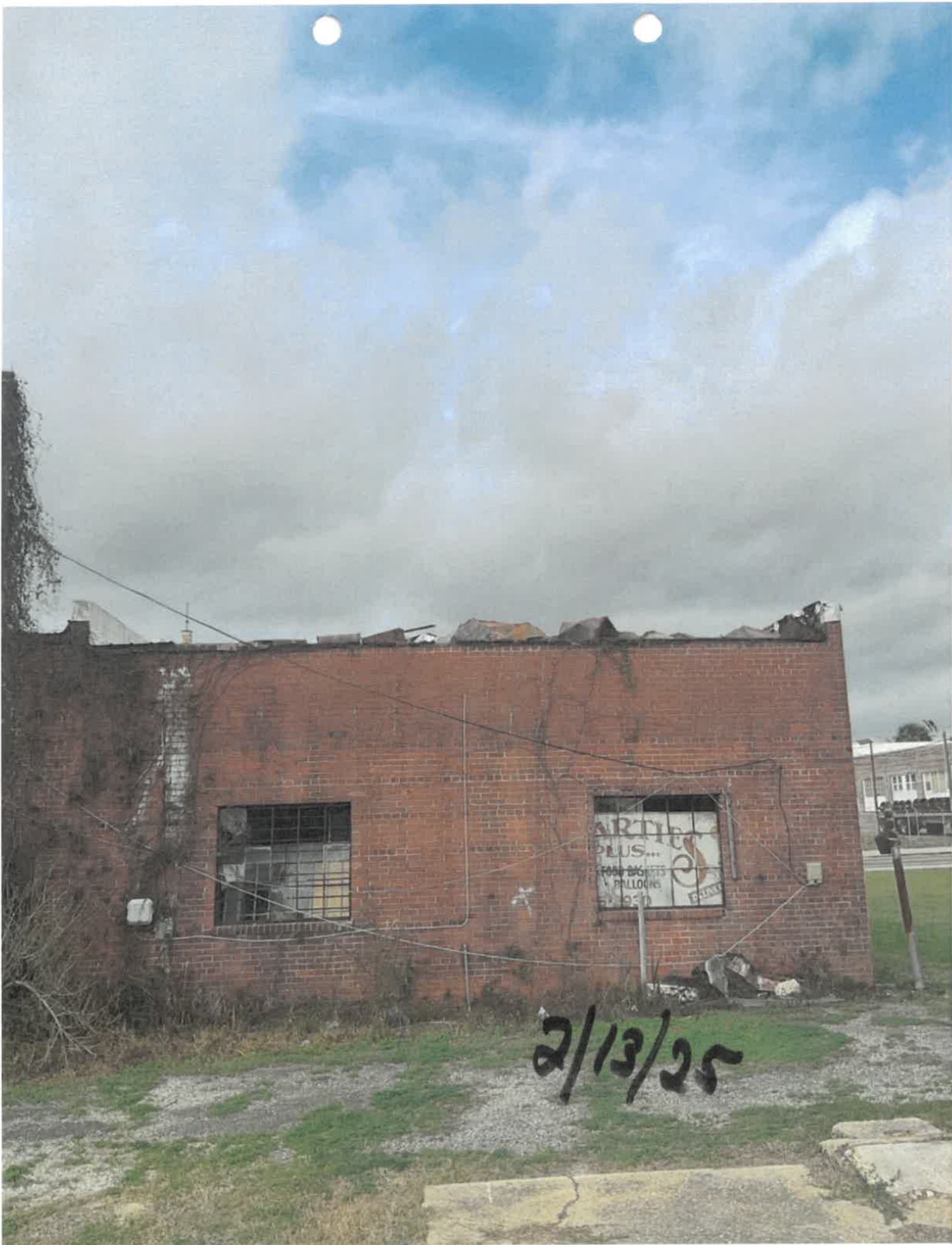


2/13/25

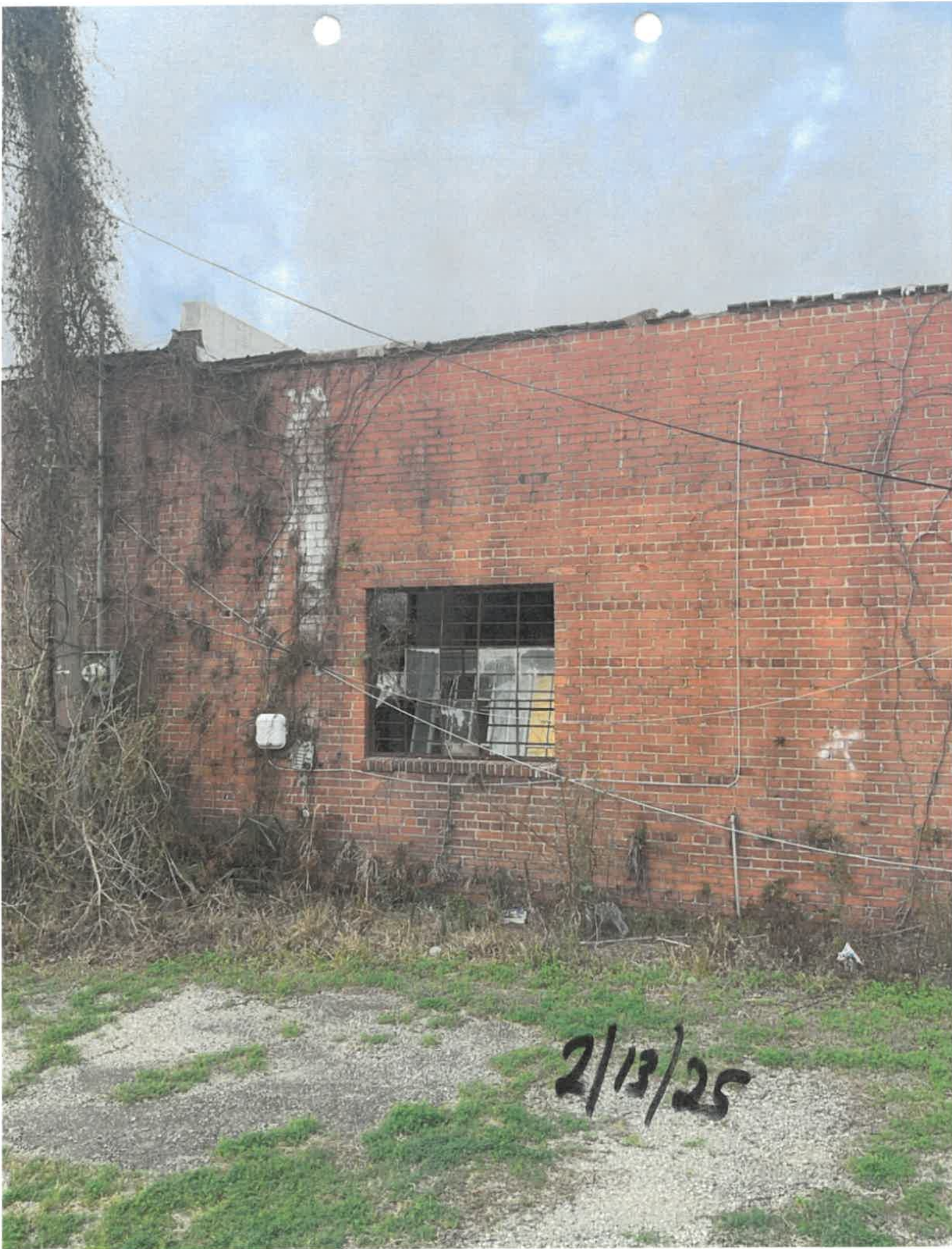


2/13/25





2/13/25



2/13/25



2/13/25

MR



SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return this card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Address

211 Taylor Ave. SW
Live Oak, FL 32064



9590 9402 9016 4122 8435 85

Article Number (Transfer from service label)

9589 0710 5270 2886 2509 89

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Charles Martin

☐ Agent☐ Addressee

B. Received by (Printed Name)

Charles Martin

C. Date of Delivery

7/18/25

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☐ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ Registered Mail☐ Registered Mail Restricted Delivery☐ Signature Confirmation☐ Signature Confirmation Restricted Delivery☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

City of Lake City
Code Enforcement
205 N. Marion Ave.
Lake City, Florida 32055



9589 0710 5270 2886 2509 89
9589 0710 5270 2886 2509 89

U.S. Postal ServiceTM
CERTIFIED MAIL[®] RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com

OFFICIAL USE

Certified Mail Fee	\$4.05
Extra Services & Fees (check box, add as appropriate)	
<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$4.10
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postmark
Here

Postage
\$1.64
Total Postage and Fees
\$5.69

Sent To

Street and Apt. No., or PO Box No.

City, State, ZIP+4[®]

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

MAILED 7/10/15

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

*CHARLES F. MARTIN
211 Taylor Ave. SW
LIVE Oak, FL 32064*



9590 9402 9016 4122 8435 85

2. Article Number (Transfer from service label)

9589 0710 5270 2886 2509 89

PS Form 3811, July 2020 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent

☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
if YES, enter delivery address below: ☐ No

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☐ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery
- ☐ Priority Mail Express®

Domestic Return Receipt

Certified Mail

- A receipt (this portion)
- A unique identifier for delivery.
- Electronic verification of delivery.
- A record of delivery (signature) that is retained for a specified period.
- Important Reminders
- You may purchase Certified Mail® service.
- First-Class Mail® First-Class Mail® service or Priority Mail® service.
- Certified Mail service.
- International mail.
- Insurance coverage is available with Certified Mail service or Certified Mail Restricted Delivery.
- Insurance coverage is available with certain Priority Mail® Restricted Delivery.
- For an additional fee, you can request a return receipt service of delivery (including electronic version).
- You can request a return receipt service of delivery (including electronic version).
- Complete PS Form 3800, January 2020.

CHARLES F. MARTIN
211 Toydon Ave. SW
Live Oak, FL 32064

Mailed 7/10/25

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

CHARLES F. MARTIN
211 Taylor Ave. SW
LIVE Oak, FL 32064



9590 9402 9016 4122 8436 53

2. Article Number (Transfer from service label)

9589 0710 5270 2886 2509 27

PS Form 3811, July 2020 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X C Martin

☐ Agent☐ Addressee

B. Received by (Printed Name)

C Martin

C. Date of Delivery

6/30/25

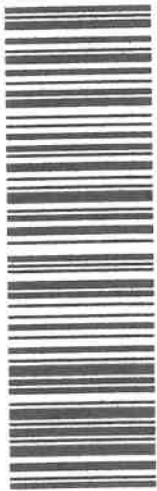
D. Is delivery address different from item 1? ☐ YesIf YES, enter delivery address below: ☐ No

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☐ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ Insured Mail☐ Mail Restricted Delivery
(500)☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted
Delivery☐ Signature Confirmation™☐ Signature Confirmation
Restricted Delivery

Domestic Return Receipt

City of Lake City
Code Enforcement
205 N. Marion Ave.
Lake City, Florida 32055



9589 0710 5270 2886 2509 27

9589 0710 5270 2886 2509 27

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com.

OFFICIAL USE

Certified Mail Fee

\$ 4.85

Extra Services & Fees (check box, add fee as appropriate)

☒ Return Receipt (hardcopy) \$ 4.10

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postmark
Here

Postage

\$ 1.69

Total Postage and Fees

\$ 6.64

Sent to

CHARLES F. MARTIN

Street and Apt. No., or PO Box No.

211 Taylor Ave. SW

City, State ZIP+4®

Lake City, FL 32064

PS Form 3800, January 2023 PSN 7531-02-000-9047 See Reverse for Instructions

MAILED 6/25/25
NOV & NOV

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

*CHARLES F. MARTIN
211 Taylor Ave. SW
LIVE Oak, FL 32064*



9590 9402 9016 4122 8436 53

2. Article Number (Transfer from service label)

9589 0710 5270 2886 2509 27

PS Form 3811, July 2020 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☒ Agent

☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes ☐ No
if YES, enter delivery address below:

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☐ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Insured Mail
- ☐ Mail Restricted Delivery
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

Certified Mail

- A receipt (this portion of delivery)
- Electronic verification of delivery
- A unique identifier for you
- First-Class Mail®
- Priority Mail®
- Certified Mail service is International mail.
- Insurance coverage is with Certified Mail service of Certified Mail service insurance coverage and certain Priority Mail item
- For an additional fee, an endorsement on the mailpiece is required for the following services:
- Return receipt service of delivery (including You can request a hard copy receipt attach PS Form 3800, January 2020 PS Form 3800

*MANCO 6/25/25
NOV 7 NOV*

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

CHARLES F. MARTIN
211 SW TAYLOR AVE.
LIVE OAK, FL 32064



9590 9402 8577 3244 7287 17

2. Article Number (Transfer from service label)

9589 0710 5270 2886 2505 07

PS Form 3811, July 2020 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

* Charles Martin

- ☐
- Agent
-
- ☐
- Addressee

B. Received by (Printed Name)

Charles Martin

C. Date of Delivery

3/19/25

- D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

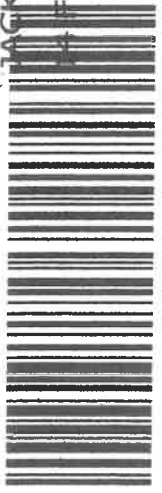
3. Service Type

- | | |
|--|---|
| <input type="checkbox"/> Adult Signature | <input type="checkbox"/> Priority Mail Express® |
| <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™ |
| <input type="checkbox"/> Certified Mail® | <input type="checkbox"/> Registered Mail Restricted Delivery |
| <input type="checkbox"/> Certified Mail Restricted Delivery | <input type="checkbox"/> Signature Confirmation¹ |
| <input type="checkbox"/> Collect on Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | |
| <input type="checkbox"/> Insured Mail | |
| <input type="checkbox"/> Registered Mail Restricted Delivery \$500 | |

Domestic Return Receipt

RET 3/24/25

City of Lake City
Code Enforcement
205 N. Marion Ave.
Lake City, Florida 32055



9589 0710 5270 1815 1131 73

JACKSONVILLE FL 320

FEB 2025 PM



US POSTAGE

LAKE CITY



ZIP 32055
02 7H
000608959
FEB 14 2025

1/3Pc

COMPASSION LOVE CENTER INC.
C/O SHAWN CONROY
558 NW LASSIE BECK ST.
WHITE SPRINGS, FL

RET 3/17/25

NIXIE 326 DE 1 0003/07/25

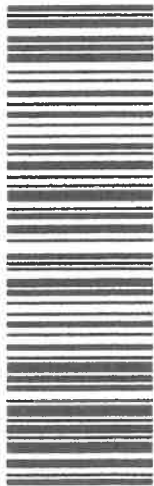
RETURN TO SENDER
UNCLAIMED
UNABLE TO FORWARD

UNC
32055391805

BC: 32055391805 *1738-01888-14-44



CHARLES MARTIN



9589 0710 5270 2886 2505 07

9589 0710 5270 2886 2505 07

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee

\$ 4.85

Extra Services & Fees (check box, add fees as appropriate)

- ☒ Return Receipt (hardcopy) \$ 4.10
☐ Return Receipt (electronic) \$ _____
☐ Certified Mail Restricted Delivery \$ _____
☐ Adult Signature Required \$ _____
☐ Adult Signature Restricted Delivery \$ _____

Postage

\$ 4.29

Total Postage and Fees

\$ 9.14

Sent to

CHARLES MARTIN
Street and Apt. No., or PO Box No.

211 SW Taylor Ave.

City, State, ZIP+4®

Lake City, FL 32964

Postmark
Here

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

3/17/25

City of Lake City
Code Enforcement
205 N. Marion Ave.
Lake City, Florida 32055

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

*CHARLES F. MARTIN
211 SW Taylon Ave.
Live Oak, FL 32064*



9590 9402 8577 3244 7287 17

2. Article Number (Transfer from service label)

9589 0710 5270 2886 2505 07

PS Form 3811, July 2020 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent ☐ Addressee
- B. Received by (Printed Name) C. Date of Delivery
- D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

3. Service Type
- ☐ Adult Signature Restricted Delivery
 - ☐ Certified Mail®
 - ☐ Certified Mail Restricted Delivery
 - ☐ Collect on Delivery
 - ☐ Collect on Delivery Restricted Delivery
 - ☐ Insured Mail
 - ☐ Registered Mail™
 - ☐ Registered Mail Restricted Delivery
 - ☐ Signature Confirmation™
 - ☐ Signature Confirmation Restricted Delivery
 - ☐ Priority Mail Express®

ed Mail Restricted Delivery \$500

Domestic Return Receipt

Certified Mail

- A receipt (this portion)
- A unique identifier for
- Electronic verification
- delivery
- A record of delivery (in
- signature) that is valid
- for a specified period.
- Important Reminder:
- You may purchase Ce
- First-Class Mail® First
- or Priority Mail® service
- Certified Mail service
- International mail.
- Insurance coverage is
- with Certified Mail serv
- of Certified Mail serv
- insurance coverage a
- certain Priority Mail th
- For an additional fee,
- endorsement on the m
- the following services:
- Return receipt servi
- of delivery (includin
- You can request a
- electronic version, f
- complete PS Form 3
- Receipt attach PS

PS Form 3800, January

3/17/25

City of Lake City
Code Enforcement
205 N. Marion Ave.
Lake City, Florida 32055



9589 0710 5270 1815 1131 73
9589 0710 5270 1815 1131 73

U.S. Postal ServiceTM
CERTIFIED MAIL[®] RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com.

OFFICIAL USE

Certified Mail Fee \$ <u>4.95</u>	Postmark Here
Extra Services & Fees (check box, add if appropriate)	
<input checked="" type="checkbox"/> Return Receipt (hardcopy) \$ <u>4.10</u>	
<input type="checkbox"/> Return Receipt (electronic) \$	
<input type="checkbox"/> Certified Mail Restricted Delivery \$	
<input type="checkbox"/> Adult Signature Required \$	
<input type="checkbox"/> Adult Signature Restricted Delivery \$	
Postage \$ <u>1.14</u>	
Total Postage and Fees \$ <u>6.09</u>	
Sent <u>Greenwood Inv Center</u>	
Street and Apt. No., or P.O. Box No. <u>58 N. Cassie Road SE</u>	
City, State, ZIP+4 [®] <u>White Springs FL 32056</u>	

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

1-11-11

1-11-11

2/13/25

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

*Compassion Love Center Inc.
c/o Sharon Canoy
556 NW Lassie Black St.
White Spawes, FL 32096*



9590 9402 8577 3244 7290 42

2. Article Number (Transfer from service label)

9589 0710 5270 1815 1131 73

PS Form 3811, July 2020 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent
☐ Addressee

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

☐ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail
☐ Insured Mail Restricted Delivery (\$500)

☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

Certified Mail

- A receipt (this portion of the card)
- A unique identifier for your mailpiece
- Electronic verification of delivery
- A record of delivery (including signature) that is retained for a specified period.

Important Reminders:

- You may purchase Certified Mail® service for First-Class Mail®, First-Class Mail® Extra, Registered Mail®, Registered Mail Restricted Delivery, Signature Confirmation™, Signature Confirmation Restricted Delivery, Insured Mail, Insured Mail Restricted Delivery, and International Mail.
- Insurance coverage is not available for Certified Mail service.
- For an additional fee, an endorsement on the mailpiece can be obtained for the following services:
 - Return receipt services: of delivery (including a hard copy or electronic version. For complete PS Form 3811, you can request a hard copy or electronic version. For PS Form 3800, January 2020, attach PS Form 3811.

Results 1 to 6 of 6

Company: COMPASSION LOVE CENTER;

ALL	COMPANY	ADDRESS	PHONE
1.	COMPASSION LOVE CENTER INC. TIN: 42-1677350 LexID® Business Legal Entity: 0000-3408-0060 *View Sources	349 N MARION AVE LAKE CITY, FL 32055-2869 12/1990 - 11/30/2024	386-438-8748 - EST 07/15/2021 - 02/10/2025 Business FREEDOM LIFESTYLE LLC Active Phone
Match Names/Locations (up to 5):			
	COMPASSION LOVE CENTER (No recent public filings on file)	PO BOX 3785 LAKE CITY, FL 32056-3785 07/05/2024 - 10/29/2024	
	COMPASSION LOVE CENTER IN (No recent public filings on file)	1880 SW JUDY GLN LAKE CITY, FL 32025-1402 08/2005 - 06/04/2012	
	COMPASSION LOVE CENTER INC.	211 TAYLOR AVE SW LIVE OAK, FL 32064-2040 03/16/2006 - 04/18/2024	
	COMPASSION LOVE CENTER INC. (No recent public filings on file)	702 NE AGGIE AVE LAKE CITY, FL 32055-2131 08/25/2010	
2.	COMPASSION LOVE CENTER INC LexID® Business Legal Entity: 0870-0665-5070 *View Sources	341 N MARION AVE LAKE CITY, FL 32055-2869 03/10/2015 - 02/03/2023	386-438-5273 - EST 03/10/2015 - 02/10/2025 Business COMPASSION LOVE CENTER INC Active Phone
3.	COMPASSION LOVE CENTER INC. TIN: 42-1677350 LexID® Business Legal Entity: 1404-4656-2763 *View Sources	556 NW LASSIE BLACK ST WHITE SPRINGS, FL 32096-7622 03/16/2006 - 04/18/2024	
4.	COMPASSION LOVE CENTER INC (No recent public filings on file) LexID® Business Legal Entity: 1345-0157-3973 *View Sources	233 N FEDERAL HWY STE 39 DANIA, FL 33004-2840 10/15/2007	954-923-3894 - EST 02/18/2000 - 01/30/2014 Phone De-Listed in Electronic Directory Assistance
5.	LOVE AND COMPASSION CENTER LLC LexID® Business Legal Entity: 1400-6275-8902 *View Sources	833 ANDERSON AVE STE 6 COOS BAY, OR 97420-4641 06/28/2023 - 10/31/2024	
6.	LOVE AND COMPASSION CENTER LLC LexID® Business Legal Entity: 1400-6365-7961 *View Sources	222 COMMERCIAL ST NE STE 2101 SALEM, OR 97301-3410 06/28/2023	

Results 1 to 6 of 6

Company: COMPASSION LOVE CENTER;

Your DPPA Permissible Use: No Permissible Purpose

Your GLBA Permissible Use: No Permissible Purpose

Your DMF Permissible Use: Legitimate Business Purpose Pursuant to a Law, Government Rule, Regulation, or Fiduciary Duty



[Department of State](#) / [Division of Corporations](#) / [Search Records](#) / [Search by Entity Name](#) /

Detail by Entity Name

Florida Not For Profit Corporation
COMPASSION LOVE CENTER INC.

Filing Information

Document Number	N05000008180
FEI/EIN Number	42-1677350
Date Filed	08/10/2005
State	FL
Status	ACTIVE
Last Event	REINSTATEMENT
Event Date Filed	10/03/2016

Principal Address

349 N. MARION STREET
LAKE CITY, FL 32055

Changed: 04/27/2023

Mailing Address

349 N. MARION STREET
LAKE CITY, FL 32055

Changed: 11/08/2010

Registered Agent Name & Address

MARTIN, CHARLES
702 NE AGGIE AVE
LAKE CITY, FL 32055

Officer/Director Detail

Name & Address

Title P

MARTIN, CHARLES
211 S.W. TAYLOR AVE
LIVE OAK, FL 32064

Title T

GREEN, PATRICK
349 N. MARION STREET
LAKE CITY, FL 32055

Title BM

MARTIN, CHAWICK
349 N. MARION STREET
LAKE CITY, FL 32055

Title BOARD MEMBER

CLARIDY, SHAWN L
556 NW LASSIE BLACK RD
WHITE SPRINGS, FL 32096

Annual Reports

Report Year	Filed Date
2022	04/28/2022
2023	04/27/2023
2024	04/18/2024

Document Images

04/18/2024 -- ANNUAL REPORT	View image in PDF format
04/27/2023 -- ANNUAL REPORT	View image in PDF format
04/28/2022 -- ANNUAL REPORT	View image in PDF format
04/19/2021 -- ANNUAL REPORT	View image in PDF format
06/29/2020 -- ANNUAL REPORT	View image in PDF format
04/30/2019 -- ANNUAL REPORT	View image in PDF format
04/27/2018 -- ANNUAL REPORT	View image in PDF format
05/08/2017 -- ANNUAL REPORT	View image in PDF format
10/03/2016 -- Reinstatement	View image in PDF format
09/03/2015 -- ANNUAL REPORT	View image in PDF format
04/25/2014 -- ANNUAL REPORT	View image in PDF format
05/04/2013 -- ANNUAL REPORT	View image in PDF format
05/03/2012 -- ANNUAL REPORT	View image in PDF format
04/28/2011 -- ANNUAL REPORT	View image in PDF format
11/08/2010 -- REINSTATEMENT	View image in PDF format
04/28/2009 -- ANNUAL REPORT	View image in PDF format
05/05/2008 -- ANNUAL REPORT	View image in PDF format
04/30/2007 -- ANNUAL REPORT	View image in PDF format
03/16/2006 -- ANNUAL REPORT	View image in PDF format
03/16/2006 -- Amendment	View image in PDF format
08/10/2005 -- Domestic Non-Profit	View image in PDF format