FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

DOCUMENT # F03969

(5)

BILL CHILDERS, INC.

Principal Place of Business Mailing Address							
226 E 6TH AVE TALLAHASSEE FL 32303 Malang Address 226 E 6TH AVE TALLAHASSEE FL 32303-8							
					3. Date Incorporated or Qualified 11/01/1980	3a. Date of Last F 01/24/1996	•
	lace of Business	2a. Mailing Address			4. FEI Number		pplied For
21 South Arst	de cate	26 Costa And House			59-2031179		ot Applicable
Suite, Apt	# ₁ t (C	Suite, Apt. #, etc.			5. Certificate of Status Desired	1 1	Additional equired
City & State	€	City & State			6. Election Campaign Financing		<u></u>
23		28			Trust Fund Contribution	Added	May Be to Fees
Zφ	Country	Z _I p	Country		8. This corporation has liability for it	·····	
24	25	29	30	····	Florida Statutes	Yes No	
	9. Name and Address of Current	Registered Agent	81	Nesse	10. Name and Address of New Re	istered Agent	
	AMPION JR, EARNEST LAVAN		*'	Name			
	E 6TH AVE		82	Street Addr	ess (P.O. Box Number is Not Acceptab	le)	
IAL	LAHASSEE FL 32303		83				
			84	City		FL 85 Zip	Code
Office or n	to the provisions of Sections 607 0502 egistered agent, or both, in the State c m familiar with, and accept the obligat	il Honda, Such changa was	: authorized hv	the corcorat	oration submits this statement for the pion's board of directors. I hereby accep	urpose of changing in the appointment as	ts registered registered
	Sign from Typed or painted Facue of registered agent		TE: Registered Ager	i signature requir		DATE	
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC		
T TEE NAME	CHAMPION JR, ERNEST LAVAI		1.1 TITLE			Change	Addition
STREET ADORESS	1102 SAVANNAH TRACE	*	1.2 NAM6 1.3 STREET /	LDDDSSC	·		
City St- Zif	TALLAHASSEE FL		1.4 CITY - ST				
THILE	VD	DELETE	2.1 TITLE	- ZIF		Change	Addition
NAME	CHILDERS, SAM		2.2 NAME				
STEEF LADORESS	2005 E FOREST DR		2.3 STREET A	ADDRESS			
CH1+ST ZIF	TALLAHASSEE FL		2. 4 CITY - S1	r- ZIP			
THE		☐ DELETE	3.1 TITLE			Change	Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET A	ADDRESS			•
CHY-SE-ZIP			3.4, CITY-SI	1.7IP			
TITLE		L DELETE	4.1 TITLE			Change	Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET A				
C IY+S1 ZIF THEE		DELETE	4.4 CITY - ST	- 7IP	***************************************	Chanas	Addition .
NAVE			5.1 TITLE 5.2 NAME			L Change	Addition
STREET ADDRESS			5.3 STREET A	IDDBESS			•
C(1Y - S1 - 7)P			5.4 CITY-ST				
TILE		DELETE	6.1 TITLE	***		Change	Addition
NAME			6.2 NAME		•		
STREET ADDRESS			6.3 STREET A	DDRESS			•
CHY - ST - 74P	/	// /	6.4 CITY - ST				
14. I do herel:	by certify that the information symbled	uth this fully does not qual	lify for the exen	notion stated	in Section 119,07(3)(i), Florida Statutes	I further certify that	the
Lam an of	raindicated on this amount report or su flicer or director of the dorporation or t in Brock 12 or Block 13 if changed, or a	of emental Junnual report is treceived or trustee empor in an attrohment with an ad	wered to execu	ate and that ite this repor	my signature shall have the same legal t as required by Chapter 607, Florida St	effect as if made un- atutes; and that my r	der oath; that name

SIGNATURE:

Van Champion; Jr. ME OF SIGNING OFFICER OF DIRECTOR

FILED

Mar 03 1997 8:00am

Secretary of State