SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375.)

PROFIT CORPORATION ANNUAL REPORT
1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **G58960** **(7)**

1. Corporation Name
BOTT ENTERPRISES, INC.

Principal Place of Business	Mailing Address
% WILLIAM J. GREEN 418 N. PALAFOX ST PENSACOLA FL 32501	% WILLIAM J. GREEN 418 N. PALAFOX ST PENSACOLA FL 32501

3. Date Incorporated or Qualified: 09/09/1983
3a. Date of Last Report: 08/01/1995

2. Principal Place of Business
21 3300 N. Pace Blvd.
Suite, Apt. #, etc.
22 Suite 315
City & State
23 Pensacola, FL
Zip 24 32505 Country 25 USA

2a. Mailing Address
26 P. O. Box 12602
Suite, Apt. #, etc.
27
City & State
28 Pensacola, FL
Zip 29 32574 Country 30 USA

4. FEI Number: 59-2347628 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

DEES, DAVID
418 N. PALAFOX ST
PENSACOLA FL 32501

10. Name and Address of New Registered Agent

81 Name: NEW ADDRESS
82 Street Address (P.O. Box Number is Not Acceptable): 3300 N. Pace Blvd
83 Suite 315
84 City: Pensacola FL 85 Zip Code: 32505

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent's signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DPT	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	BOTT, GEORGE F		1.2 NAME		
STREET ADDRESS	3925 MONTALVO DRIVE		1.3 STREET ADDRESS		
CITY-ST-ZIP	PENSACOLA, FL 00000		1.4 CITY-ST-ZIP		
TITLE		☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2.4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (3/96)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that 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 oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12.0r, Block 13 if changed, or on an attachment with an address.

SIGNATURE: George F Bott Director 4th June 1996 432-2407
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
George F Bott