

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

95 JAN 24 PM 2: 56

DOCUMENT # K09457 (8)

1. Corporation Name  
**BRUCE MANAGEMENT CONSULTANTS, INC.**

Principal Place of Business Mailing Address  
428 9TH ST S. 428 9TH ST S.  
NAPLES FL 33940 NAPLES FL 33940

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 12/28/1987  
3a. Date of Last Report 02/07/1994

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip 25 Country 29 Zip 30 Country

4. FEI Number 65-0003758  
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

CRAWFORD, J. STEPHEN  
9200 BONITA BEACH RD  
BONITA SPRINGS FL 33923

10. Name and Address of New Registered Agent

81 Name Charles Kelly  
82 Street Address (P.O. Box Number is Not Acceptable) 2640 Golden Gate Pkwy # 315  
83 Naples  
84 City FL 85 Zip Code 33912

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. I am familiar with, and accept the obligations of, Section 607.0501, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent (and title if applicable).

(NOTE: Registered Agent signature required when resigning)

DATE

*[Signature]* 1-16-95

12. OFFICERS AND DIRECTORS

TITLE	DST
NAME	BRUCE, EDWIN M., III
STREET ADDRESS	630 ORCHID DR
CITY-ST-ZIP	NAPLES FL
TITLE	P
NAME	BRUCE, BARBARA J.
STREET ADDRESS	630 ORCHID DR
CITY-ST-ZIP	NAPLES FL
TITLE	V
NAME	DAISY, CHERYL A.
STREET ADDRESS	4920 HAWAII BLVD
CITY-ST-ZIP	NAPLES FL
TITLE	V
NAME	NUSZ, CHERLY A.
STREET ADDRESS	4920 HAWII BLVD
CITY-ST-ZIP	NAPLES FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	No Longer an officer of this corp.
1.4 CITY-ST-ZIP	
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	PST
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	33946
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	Cheryl
4.3 STREET ADDRESS	# 10 Newberry
4.4 CITY-ST-ZIP	33962
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
Barbara J. Bruce

1/12/95 813 264 5333  
1/12/95 813 264 5333