

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mathan
Secretary of State
CONSUMER SERVICE INFORMATION

APPROVED
AND
FILED

55 MAY 10 AM 10:35

DOCUMENT # **L55693** (0)

BEDELL CORPORATION

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Office of Registrant: **2039 FLORIDA AVE. TALLAHASSEE FL 32303**
Mailing Address: **2039 FLORIDA AVE. TALLAHASSEE FL 32303**

DO NOT WRITE IN THIS SPACE

2. Principal Office of Registrant		2a. Mailing Address		3. Date Incorporated or Created	3a. Date of Last Report
21. State App # etc.		26. State App # etc.		03/08/1990	07/15/1994
22. City & State		27. City & State		4. FEI Number	Applied For / Not Applicable
23. City, County, State		28. City, County, State		5. Certificate of Status Desired	\$8.75 Additional Fee Required
24. City, County, State		29. City, County, State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
25. City, County, State		30. City, County, State		8. This corporation has liability for intangible tax under S. 199(1)(c) Florida Statutes. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent		
BEDELL, NATHAN G. 2039 FLORIDA AVE. TALLAHASSEE FL 32303		B1. Name		
		B2. Street Address (P.O. Box Number is Not Acceptable)		
		B3. City		
		B4. State	FL	B5. Zip Code

11. Pursuant to the provisions of Sections 607.02 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, thereby accepting the appointment as registered agent. I am hereby withdrawing the resignation of the former registered agent.

SIGNATURE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS	
TYPE	P	TYPE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BEDELL, NATHAN G.	1. NAME	
STREET ADDRESS	2039 FLORIDA AVE.	2. STREET ADDRESS	
CITY	TALLAHASSEE FL	3. CITY	
TYPE	VP	TYPE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BEDELL, ELISE D.	1. NAME	
STREET ADDRESS	2039 FLORIDA AVE.	2. STREET ADDRESS	
CITY	TALLAHASSEE FL	3. CITY	
TYPE	S	TYPE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BEDELL, BETTIE MOOR	1. NAME	
STREET ADDRESS	709 NORTH RIDE	2. STREET ADDRESS	
CITY	TALLAHASSEE FL	3. CITY	
TYPE		TYPE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1. NAME	
STREET ADDRESS		2. STREET ADDRESS	
CITY		3. CITY	
TYPE		TYPE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1. NAME	
STREET ADDRESS		2. STREET ADDRESS	
CITY		3. CITY	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and checked and qualify for the exemption stated in Section 199(1)(c), Florida Statutes. I further certify that the information included on this annual report of shareholders' annual report is true and accurate and that the corporation shall have the same legal effect as if made under oath. That I am an officer or director of this corporation or the manager or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of a changed or new annual report with an address.

SIGNATURE: *Nathan G. Bedell* **Nathan G. Bedell** **5/3/95** **(904) 422-1776**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR