FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **P34565** **(2)**

1. Corporation Name

BWI COMPANIES, INC.

Principal Place of Business

415 S. KINGS HIGHWAY
NASH TX 75569
US

Mailing Address

P.O. BOX 990
NASHVILLE TN 75569
US

3. Date Incorporated or Qualified: **07/03/1991**

3a. Date of Last Report: **05/01/1995**

4. FEI Number: **75-1789544** — 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

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26 P. O. Box 990
Suite, Apt. #, etc.
27
City & State
28 Nash, Texas
Zip 29 75569-0990 Country 30 U.S.

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0505 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 607.0505, Florida Statutes.

SIGNATURE: _____ DATE _____

12. OFFICERS AND DIRECTORS

TITLE	PCD	☐ DELETE
NAME	BUNCH, BOB J.	
STREET ADDRESS	P.O. BOX 990 NA	
CITY-ST-ZIP	NASH TX	
TITLE	SDT	☐ DELETE
NAME	BUNCH, BETTY GAYLE	
STREET ADDRESS	P.O. BOX 990 NA	
CITY-ST-ZIP	NASH TX	
TITLE	V	☐ DELETE
NAME	BUNCH, ROBERT H.	
STREET ADDRESS	P.O. BOX 990 NA	
CITY-ST-ZIP	NASH TX	
TITLE	V	☐ DELETE
NAME	BUNCH, JAMES S.	
STREET ADDRESS	P.O. BOX 990 NA	
CITY-ST-ZIP	NASH TX	
TITLE	D	☐ DELETE
NAME	MANOR, MICHAEL H	
STREET ADDRESS	4504 BRIAR OAKS CIRCLE	
CITY-ST-ZIP	DALLAS TX 75287	
TITLE	D	☐ DELETE
NAME	BLACK, STEPHEN F.	
STREET ADDRESS	10408 BARRYWOOD DR	
CITY-ST-ZIP	DALLAS TX	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Bob Bunch
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date _____ Document Receipt # _____

CR2E034 (12/95)