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 # **P94000084336 (4)**

1. Corporation Name

BLI/WEST, INC.

Principal Place of Business	Mailing Address
7423 S. DEER HAVEN ROAD SOUTHPORT FL 32409	7423 S. DEER HAVEN ROAD SOUTHPORT FL 32409

3. Date Incorporated or Qualified: **11/16/1994**
3a. Date of Last Report: **08/10/1995**
4. FEI Number: **59-3281504** ☐ 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 unemployment taxes. Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business (21 / 22 / 23 / 24 / 25)
2a. Mailing Address (26 / 27 / 28 / 29 / 30)

9. Name and Address of Current Registered Agent

BOONE, GLENNIS
7423 S. DEER HAVEN ROAD
SOUTHPORT FL 32409

10. Name and Address of New Registered Agent

81 Name: DAVIS, REBECCA J.
82 Street Address (P.O. Box Number is Not Acceptable)
83: 7517 N.DEER HAVEN ROAD
84 City: SOUTHPORT, **FL** 85 Zip Code: 32409

11. Pursuant to the provisions of Section 607.0502 or 617.1502, 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: Rebecca J. Davis S/T — DATE: FEBRUARY, 14, 1996

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P		☐ Delete
NAME	TOOLE, ROGER B	SECRETARY/TREASURER S/T	☐ Change ☒ Addition
STREET ADDRESS	7423 SOUTH DEER HAVEN ROAD	DAVIS, REBECCA J.	
CITY-ST-ZIP	SOUTHPORT FL	SOUTHPORT, FL. 32409	
TITLE			☐ Delete ☐ Change ☐ Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE			☐ Delete ☐ Change ☐ Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE			☐ Delete ☐ Change ☐ Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		03/20/98 01030 ☐ Change ☐ Addition	☐ Delete
NAME		***200.00	
STREET ADDRESS			
CITY-ST-ZIP			
TITLE			☐ Delete ☐ Change ☐ Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this report is complete, current, and does not qualify for the exemption stated in Section 119.07(3)(i), 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 business 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 added above.

SIGNATURE: Rebecca J. Davis — REBECCA J. DAVIS — 2/14/1996 — 904-271-0505
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Telephone Number