CORPORATION ANNUAL REPORT 1995

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

FILED
95 APR 12 PM 12:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000090520 (5)

1. Corporation Name
BOB'S CLAMS, INC.

Principal Place of Business	Mailing Address
3460 N COURTENAY PARKWAY SUITE 13 MERRITT ISLAND FL 32953-8328	3460 N COURTENAY PARKWAY SUITE 13 MERRITT ISLAND FL 32953-8328

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/12/1994
3a. Date of Last Report: NONE

2. Principal Place of Business
21: 336 WILLIAMS POINT BLVD
22: Suite, Apt. #, etc.
23: City & State: COCOA, FL
24: Zip: 32926
25: County: BREVARD

2a. Mailing Address
26: RD#4 BOX 940
27: Suite, Apt. #, etc.
28: City & State: HONESDALE, PA.
29: Zip: 18431
30: Country: U.S.A.

4. FEI Number: 59-3287274 ☐ 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/will be eligible for tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

WILLIAMS, RICHARD J
3460 N COURTENAY PARKWAY SUITE 13
MERRITT ISLAND FL 32953-8328

10. Name and Address of New Registered Agent

81 Name: STEPHEN R. WILLIAMS
82 Street Address (P.O. Box Number is Not Acceptable): 336 WILLIAMS POINT BLVD.
83: UNIT 4
84 City: COCOA FL 85 Zip Code: 32926

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 607.0505, Florida Statutes.

SIGNATURE: Stephen R. Williams (Signature of printed name of registered agent and the officer date) 4/04/95 (DATE)
NOTE: Registered Agent signature required when necessary.

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	☒ Change ☐ Addition
NAME	WILLIAMS, RICHARD J	12 NAME	
STREET ADDRESS	3460 N COURTENAY PARKWAY SUITE 13	13 STREET ADDRESS	8528 Lake Point Ct.
CITY ST ZIP	MERRITT ISLAND FL 32953-8328	14 CITY ST ZIP	Lake Worth FL 33467
TITLE		21 TITLE	PRESIDENT ☐ Change ☒ Addition
NAME		22 NAME	STEPHEN R WILLIAMS
STREET ADDRESS		23 STREET ADDRESS	R.D.#4
CITY ST ZIP		24 CITY ST ZIP	HONESDALE PA. 18431
TITLE		31 TITLE	☐ Change ☐ Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY ST ZIP		34 CITY ST ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY ST ZIP		44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	

14. I/We 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)(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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 with an asterisk, or on an attachment with an address.

*SIGNATURE: Stephen R. Williams Pres (SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR) 3/20/95 (Date) 407-632-4993 (Daytime Phone #)

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