

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Apr 27, 1999 8:00 am  
Secretary of State

04-27-1999 90069 044 \*\*\*150.00

DOCUMENT # 134765

1. Corporation Name

B. & P. INVESTMENT COMPANY

Principal Place of Business

60 NORTH COURT AVENUE  
P.O. BOX 3431  
ORLANDO FL 32802

Mailing Address

60 NORTH COURT AVENUE  
P.O. BOX 3431  
ORLANDO FL 32802

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/19/1937

4. FEI Number

59-1648197

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 owes the current year intangible  
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 2516 Shrewsbury Road

Suite, Apt. #, etc.

22

City & State

23 Orlando, Florida

Zip

24 32803

Country

2a. Mailing Address

26 P. O. Box 3431

Suite, Apt. #, etc.

27

City & State

28 Orlando, Florida

Zip

29 32802

Country

30

9. Name and Address of Current Registered Agent

BOWERS, J M  
60 N. COURT AVE.  
ORLANDO FL 32802

10. Name and Address of New Registered Agent

81 Name

WILLIAM H. BEARDALL

82 Street Address (P.O. Box Number is Not Acceptable)

2516 Shrewsbury Road

83

84 City

Orlando

FL

85 Zip Code

32803

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 William H. Beardall William H. Beardall

4/23/99

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

(NOTICE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☒ DELETE

NAME  
ST BOWERS, J M  
STREET ADDRESS  
424 SAN JUAN BLVD  
CITY-ST-ZIP  
ORLANDO, FL 00000

TITLE ☐ DELETE

NAME  
D BLANKNER, F W  
STREET ADDRESS  
2868 PLAZA TERRACE DRIVE  
CITY-ST-ZIP  
ORLANDO, FL 00000

TITLE ☐ DELETE

NAME  
VD LEWIS, ALBERT L  
STREET ADDRESS  
2022 MONTANA ST  
CITY-ST-ZIP  
ORLANDO, FL 00000

TITLE ☐ DELETE

NAME  
PD BEARDALL, WILLIAM H  
STREET ADDRESS  
2516 SHREWSBURY RD  
CITY-ST-ZIP  
ORLANDO, FL 00000

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition

1.2 NAME  
STD BLANKNER, FW  
1.3 STREET ADDRESS  
4380-C LAKE UNDERHILL ROAD  
1.4 CITY-ST-ZIP  
ORLANDO, FL 32803

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME  
4380-C Lake Underhill Road  
2.3 STREET ADDRESS  
Orlando, Florida 32803  
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 hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicates that 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, with all other like empowered.

SIGNATURE: William H. Beardall William H. Beardall

4/23/99

407-896-4335

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)

0103845