

165770

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Annual Report  
filed on 5-23-74

2 pgs.

VALIDATION AREA - DO NOT WRITE IN THIS SPACE  
 MAY 23-74 2 250\*\*\*\*\*5.00

**ANNUAL REPORT**  
 FOR CORPORATIONS AND  
 OTHER ENTITIES

DUE JAN 1, 1974 DELINQUENT JULY 1, 1974  
 COMP-AREA PAGE 1

SECRETARY OF STATE  
 RICHARD (DICK) STONE  
 P.O. BOX 6327  
 TALLAHASSEE, FLA. 32301

PLEASE READ INSTRUCTIONS ON PAGE 2  
 FILING FEES \$5.00 PROFIT ENTITY \$2.00 NON PROFIT.

**CORRECTIONS AND ADDITIONAL INFORMATION-PLEASE TYPE**

(4b) 59-0918189  
 FED. EMPLOYER ID. NO.

(6a) RESIDENT AGENT CHANGE

(7a) OFFICERS/DIRECTORS  
 W. B. Crow 700 S. E. 3rd St., G'ville Fla.  
 C. A. Black 700 S. E. 3rd St., G'ville Y.P.  
 B. G. Whiteman 700 S. E. 3rd St., G'ville Sec.  
 R. Y. Aunger 700 S. E. 3rd St., G'ville Treas.

(8a) FISCAL CLOSE OF ACCOUNTING PERIOD (MONTH) December

(9a) ADDRESS CHANGE AREA

(9b) STREET

(10b) CAPITAL STOCK (OR NUMBER & BOOK VALUE OF ALL CERTIFICATES OF INTEREST OR PARTICIPATION)  
 CLASS OR TYPE PAR. NO. PAR. OR STATED VALUE SHARES AUTHORIZED  
 (1) Common \$1.00 100,000 3795\$39,795.00

(10c) IF YOU DO NOT HAVE CAPITAL STOCK, DESCRIBE THE GENERAL RULES APPLICABLE TO ALL MEMBERS BY WHICH THE PROPERTY RIGHTS AND INTERESTS OF EACH ARE DETERMINED

(12) RESIDENT AGENT SIGNATURE

(1) 163770  
 CHARTER NUMBER  
 DATE INC. OR, IF FOREIGN, DATE QUALIFIED IN FLA.  
 05/13/1991

(3) BLACK CROW AND BIOSYSTEMS, INC.  
 EXACT NAME

(4) FED. EMP. ID. NO. 77-7777777  
 (5) SIC CODE 7777

(6) PLEASE SEE ITEMIZED INSTR., ITEM #6

(7) OFFICERS/DIRECTORS NAMES CITY / STATE  
 PLEASE SEE ITEMIZED INSTRUCTIONS, ITEM #7

(8) FISCAL CLOSE OF ACCOUNTING PERIOD 11  
 163770  
 BLACK CROW AND BIOSYSTEMS, INC.  
 CHARLES A BLACK  
 700 S E 3RD ST  
 GAINESVILLE FLA 32601

(10) PRIMARY STOCK  
 AUTH. STK. 7777777777 PAR VALUE 7777777777

DECLARE THAT ALL FLORIDA DOCUMENTARY STAMP TAXES APPLICABLE TO CORPORATE STOCK (OR CERTIFICATES OF INTEREST OR PARTICIPATION) TRANSACTIONS DURING THE PREVIOUS YEAR HAVE BEEN PAID AS REQUIRED BY CHAPTER 201, FLORIDA STATUTES; I FURTHER DECLARE THAT I AM THE AUTHORIZED PERSON TO SIGN THE REPORT FOR THIS ENTITY AND THAT IT IS TRUE AND CORRECT.

AUTHORIZED SIGNATURE  
 TITLE: President  
 TEL. NO. 904-372-8742