

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

APPROVED
AND
FILED

53 MAY -1 AM 7:43

SIGNATURE STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995	 FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
--------------------------------------	--

DOCUMENT # 273816 (9)
1. Corporation Name: BARNEYS SERVICE COMPANY

Principal Office Address: 4655-F SPRUCE CREEK ROAD PORT ORANGE FL 32127	Mailing Address: 4655-F SPRUCE CREEK ROAD PORT ORANGE FL 32127
---	--

2. Principal Place of Business: 21	2a. Mailing Address: 26
State, Apt. # etc: 22	State, Apt. # etc: 27
City & State: 23	City & State: 28
County: 24	County: 29
Zip Code: 25	Zip Code: 30

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/18/1963	3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-1033648	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
7. This Corporation has submitted for filing its annual report under Chapter 607, Florida Statutes: ☒ Yes ☐ No	

9. Name and Address of Current Registered Agent: BIMSTEIN, BARNEY 4655-F SPRUCE CREEK ROAD PORT ORANGE FL 32127

10. Name and Address of New Registered Agent:
81. Name:
82. Street Address (P.O. Box Number is Not Acceptable):
83. City:
84. City:
85. Zip Code:

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 607.0506, Florida Statutes.

SIGNATURE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS BY:	
NAME	DP BIMSTEIN, BARNEY 5751 STEWART AVENUE PORT ORANGE, FL 00000	1. NAME	☐ Change ☐ Addition
STREET ADDRESS		2. NAME	
CITY, ST, ZIP		3. STREET ADDRESS	
NAME	D BIMSTEIN, JEANNE 5751 STEWART AVENUE PORT ORANGE, FL 00000	4. CITY, ST, ZIP	
STREET ADDRESS		5. NAME	☐ Change ☐ Addition
CITY, ST, ZIP		6. STREET ADDRESS	
NAME		7. CITY, ST, ZIP	
STREET ADDRESS		8. NAME	☐ Change ☐ Addition
CITY, ST, ZIP		9. STREET ADDRESS	
NAME		10. CITY, ST, ZIP	
STREET ADDRESS		11. NAME	☐ Change ☐ Addition
CITY, ST, ZIP		12. STREET ADDRESS	
NAME		13. CITY, ST, ZIP	
STREET ADDRESS		14. NAME	☐ Change ☐ Addition
CITY, ST, ZIP		15. STREET ADDRESS	
NAME		16. CITY, ST, ZIP	
STREET ADDRESS		17. NAME	☐ Change ☐ Addition
CITY, ST, ZIP		18. STREET ADDRESS	
NAME		19. CITY, ST, ZIP	
STREET ADDRESS		20. NAME	☐ Change ☐ Addition
CITY, ST, ZIP		21. STREET ADDRESS	
NAME		22. CITY, ST, ZIP	
STREET ADDRESS		23. NAME	☐ Change ☐ Addition
CITY, ST, ZIP		24. STREET ADDRESS	
NAME		25. CITY, ST, ZIP	
STREET ADDRESS		26. NAME	☐ Change ☐ Addition
CITY, ST, ZIP		27. STREET ADDRESS	
NAME		28. CITY, ST, ZIP	
STREET ADDRESS		29. NAME	☐ Change ☐ Addition
CITY, ST, ZIP		30. STREET ADDRESS	
NAME		31. CITY, ST, ZIP	
STREET ADDRESS		32. NAME	☐ Change ☐ Addition
CITY, ST, ZIP		33. STREET ADDRESS	
NAME		34. CITY, ST, ZIP	
STREET ADDRESS		35. NAME	☐ Change ☐ Addition
CITY, ST, ZIP		36. STREET ADDRESS	
NAME		37. CITY, ST, ZIP	
STREET ADDRESS		38. NAME	☐ Change ☐ Addition
CITY, ST, ZIP		39. STREET ADDRESS	
NAME		40. CITY, ST, ZIP	
STREET ADDRESS		41. NAME	☐ Change ☐ Addition
CITY, ST, ZIP		42. STREET ADDRESS	
NAME		43. CITY, ST, ZIP	
STREET ADDRESS		44. NAME	☐ Change ☐ Addition
CITY, ST, ZIP		45. STREET ADDRESS	
NAME		46. CITY, ST, ZIP	
STREET ADDRESS		47. NAME	☐ Change ☐ Addition
CITY, ST, ZIP		48. STREET ADDRESS	
NAME		49. CITY, ST, ZIP	
STREET ADDRESS		50. NAME	☐ Change ☐ Addition
CITY, ST, ZIP		51. STREET ADDRESS	
NAME		52. CITY, ST, ZIP	
STREET ADDRESS		53. NAME	☐ Change ☐ Addition
CITY, ST, ZIP		54. STREET ADDRESS	
NAME		55. CITY, ST, ZIP	
STREET ADDRESS		56. NAME	☐ Change ☐ Addition
CITY, ST, ZIP		57. STREET ADDRESS	
NAME		58. CITY, ST, ZIP	
STREET ADDRESS		59. NAME	☐ Change ☐ Addition
CITY, ST, ZIP		60. STREET ADDRESS	
NAME		61. CITY, ST, ZIP	
STREET ADDRESS		62. NAME	☐ Change ☐ Addition
CITY, ST, ZIP		63. STREET ADDRESS	
NAME		64. CITY, ST, ZIP	
STREET ADDRESS		65. NAME	☐ Change ☐ Addition
CITY, ST, ZIP		66. STREET ADDRESS	
NAME		67. CITY, ST, ZIP	
STREET ADDRESS		68. NAME	☐ Change ☐ Addition
CITY, ST, ZIP		69. STREET ADDRESS	
NAME		70. CITY, ST, ZIP	
STREET ADDRESS		71. NAME	☐ Change ☐ Addition
CITY, ST, ZIP		72. STREET ADDRESS	
NAME		73. CITY, ST, ZIP	
STREET ADDRESS		74. NAME	☐ Change ☐ Addition
CITY, ST, ZIP		75. STREET ADDRESS	
NAME		76. CITY, ST, ZIP	
STREET ADDRESS		77. NAME	☐ Change ☐ Addition
CITY, ST, ZIP		78. STREET ADDRESS	
NAME		79. CITY, ST, ZIP	
STREET ADDRESS		80. NAME	☐ Change ☐ Addition
CITY, ST, ZIP		81. STREET ADDRESS	
NAME		82. CITY, ST, ZIP	
STREET ADDRESS		83. NAME	☐ Change ☐ Addition
CITY, ST, ZIP		84. STREET ADDRESS	
NAME		85. CITY, ST, ZIP	
STREET ADDRESS		86. NAME	☐ Change ☐ Addition
CITY, ST, ZIP		87. STREET ADDRESS	
NAME		88. CITY, ST, ZIP	
STREET ADDRESS		89. NAME	☐ Change ☐ Addition
CITY, ST, ZIP		90. STREET ADDRESS	
NAME		91. CITY, ST, ZIP	
STREET ADDRESS		92. NAME	☐ Change ☐ Addition
CITY, ST, ZIP		93. STREET ADDRESS	
NAME		94. CITY, ST, ZIP	
STREET ADDRESS		95. NAME	☐ Change ☐ Addition
CITY, ST, ZIP		96. STREET ADDRESS	
NAME		97. CITY, ST, ZIP	
STREET ADDRESS		98. NAME	☐ Change ☐ Addition
CITY, ST, ZIP		99. STREET ADDRESS	
NAME		100. CITY, ST, ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 135.01(1)(b) Florida Statutes. I further certify that this information is not false, and that the annual report or report of financial condition 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 Trust or of trustee responsible to create this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 of this form.

SIGNATURE: 
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
BARNEY BIMSTEIN

4-30-95 904 767-1303