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May 12 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 293842

(1)

1. Corporation Name

BARTOW FLORIDA CORPORATION

Principal Place of Business

HWY 41SR 451 3/4 MI. N. OF ARCHER
ARCHER FL 32618

Mailing Address

10310 S.W. SR 45
ARCHER FL 32618-3422



3. Date Incorporated or Qualified

08/11/1965

3a. Date of Last Report

03/14/1996

2. Principal Place of Business

21 2631 NW 41st ST.

Suite, Apt. #, etc.

22 Suite C-2

City & State

23 Gainesville, FL

24 Zip 32606

Country

25 USA

2a. Mailing Address

26 P.O. Box 950

Suite, Apt. #, etc.

27 City & State

28 Archer, FL

29 Zip 32618

Country

30 USA

4. FEI Number

52-0816754

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 intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

HUFTY, JOHN A.
10310 SW SR 45
ARCHER FL 32618

10. Name and Address of New Registered Agent

81 Name

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

1152 Lake Clarke Drive

83

84 City

West Palm Beach,

FL

85 Zip Code

33406

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE AST
NAME HUFTY, JOHN P
STREET ADDRESS 0310 SW SR 45
CITY-ST-ZIP ARCHER FL

☐ DELETE

TITLE VDT
NAME HUFTY, DONNA J
STREET ADDRESS 10310 SW SR 45
CITY-ST-ZIP ARCHER FL

☐ DELETE

TITLE PTD
NAME HUFTY, JOHN A
STREET ADDRESS 10310 SW SR 45
CITY-ST-ZIP ARCHER FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS P.O. Box 950 N/A
1.4 CITY-ST-ZIP Archer, FL 32618

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS P.O. Box 950 N/A
2.4 CITY-ST-ZIP Archer, FL 32618

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS 1152 Lake Clarke Drive
3.4 CITY-ST-ZIP West Palm Beach, FL 33406

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 do 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 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 if changed, or on an attachment with an address.

SIGNATURE:

John A. Hufty
SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-9-97 352-495-2279

CR2E034 (9/96)