

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

APPROVED
AND
FILED

95 MAY -1 AM 10:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

DOCUMENT #	361985	(5)
1. Corporation Name BANDERA INC		

Principal Place of Business 850 PARADISE BEACH CIRCLE PENSACOLA FLORIDA 32506 US	Mailing Address 850 PARADISE BEACH CIRCLE PENSACOLA FLORIDA 32506 US
--	--

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualified 03/31/1970	3a. Date of Last Report 06/13/1994
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 59-1357435	Applied For Not Applicable
City & State 23	City & State 28	5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
Zip 24	Country 25	6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
		7. This corporation has liability for intangible tax under E. 199.009, Florida Statutes ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent LEESER, KEVIN J. 850 PARADISE BCH CIRCLE PENSACOLA FL 32506		10. Name and Address of Now Registered Agent	
		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83	
		84 City	FL 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 607.0505, Florida Statutes.

SIGNATURE _____ (Signature, typed or printed name of registered agent and date of application) (NOTE: Registered Agent signature required when renewing) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P LEESER, KEVIN J. 850 PARADISE BCH CIRCLE PENSACOLA FL	11 TITLE	☐ Change ☐ Addition
NAME		12 NAME	
STREET ADDRESS		13 STREET ADDRESS	
CITY, ST., ZIP		14 CITY, ST., ZIP	
TITLE	S MCCOSKRIE, MARY LOU 2345 C VIA MARITOSA WEST LAGUNA HILLS CA 92503	21 TITLE	☐ Change ☐ Addition
NAME		22 NAME	
STREET ADDRESS		23 STREET ADDRESS	
CITY, ST., ZIP		24 CITY, ST., ZIP	
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 do hereby certify that the information supplied with this filing is voluntarily furnished and 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:  **Kevin J. Leeser** **4/3/95** **334 943 4571**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #