

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

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PROFIT
CORPORATION
ANNUAL REPORT
1999



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

DOCUMENT # **373439**

1. Corporation Name

BSJ CORPORATION



Principal Place of Business

**5505 NW 48 PLACE
GAINESVILLE FL 32606**

Mailing Address

**5505 NW 48 PLACE
GAINESVILLE FL 32606**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/02/1970

4. FEI Number

59-1307819

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 5525 NW 48th Place

Suite, Apt. #, etc.

22

City & State

23 Gainesville, FL

Zip

24 32606

Country

25 US

2a. Mailing Address

26 5525 NW 48th Place

Suite, Apt. #, etc.

27

City & State

28 Gainesville, FL

Zip

29 32606

Country

30 US

9. Name and Address of Current Registered Agent

**RUTENBERG, BARRY S
2820 NW 31 TERR
GAINESVILLE FL 32605**

81 Name

Rutenberg, Barry (B.)

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

83

84 City

FL

85 Zip Code

10. Name and Address of New Registered Agent

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.

(NOT Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PD** ☐ DELETE
NAME **RUTENBURG, BARRY S**
STREET ADDRESS **5505 NW 48 PLACE**
CITY-STATE-ZIP **GAINESVILLE FL 32606**

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME **Rutenberg, Barry (B.)**
1.3 STREET ADDRESS **2820 NW 31st Terrace**
1.4 CITY-STATE-ZIP **Gainesville, FL 32605**

TITLE **SD** ☐ DELETE
NAME **ROSENBERG, SHARON**
STREET ADDRESS **5505 NW 48 PLACE**
CITY-STATE-ZIP **GAINESVILLE FL 32606**

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME **2820 NW 48th Place**
2.3 STREET ADDRESS **Gainesville, FL 32605**
2.4 CITY-STATE-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-STATE-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-STATE-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-STATE-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-STATE-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.073(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, with a power like empowered.

SIGNATURE:

Barry B. Rutenberg

Barry B. Rutenberg, Pres. 4/20/99 352-373-8466

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/98)