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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90208 029 \*\*\*150.00

DOCUMENT #	400388
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B & T INC.

× .			
Principal Place of Business	Mailing Address		
756 BEACHLAND BLVD. VERO BCH. FL 32963-8745	756 BEACHLAND BLVD. VERO BCH. FL 32963-8745		

DO NOT WRITE IN THIS SPACE

	•					3. Date Incorporated or Qualifed	
						05/02/1972	
Principal Place	of Business	2a. Mailing Addre	ess			4. FEI Number	Applied For
,		26				59-1396796	Not Applicable
Suite, Apt. #, et	tc.	Suite, Apt. #,	etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		`		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip 29	70 Go	untry		This corporation owes the current year Personal Property Tax.	Intangible ☐ Yes ☐ No
9	. Name and Address of Cu	rrent Registered Agent		T		10. Name and Address of New Registere	ed Agent
				81	Name	<del></del> -	
WODTKE, ELLEN C. 6325 1ST ST, SW VERO BEACH FL 32968		82	Street Address (P.O. Box Number is Not Acceptable)				
			83				
				84	City	F	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 title if applicable. (NOTE	: Registered Agent signature re	equired when reinstating) DATE
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PST DELETE	1.1 TΠLE	☐ Change ☐ Addition
NAME	WODTKE, ELLEN	1.2 NAME	
STREET ADDRESS	6325 1ST ST, SW	1.3 STREET ADDRESS	
CITY-ST-ZIP	VERO BEACH FL	1.4 CITY-ST-ZIP	
TITLE	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE .	DELETE	3.1 TITLE	Change Addition
NAME	***	3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4. CITY-ST-ZIP	
TITLE	DELETE	4.1 TITLE	Change Addition
NAME		4, 2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY+ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	Change Addition
NAME		5.2 NAME	
STREET ADDRESS	·	5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filling 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, with all other like empowered.

SIGNATURE:

4/12/99 561-567-8647 Daytime Phone #

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