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**

DOCUMENT # 437132

BANDY ENTERPRISES, INC.

:									
Principal Place of Business Mailing Address								,,411 81811 61811 6	
116 N. SEAWALLS PT. RD. 116 N. SEAWALLS PT. RD.									
STUART FL 34996 US US US							DO NOT WRITE IN THIS	SPACE	
03 . 03							3. Date Incorporated or Qualifed		
							10/01/1973		
2. Principal P	2. Principal Place of Business 2a. Mailing Address						4. FEI Number	Ap	plied For
21 26							59-1487851	No	t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 27							5. Certifcate of Status Desired	\$8.75 A	
City & State City & State							6. Election Campaign Financing	\$5.00	May Re
23							Trust Fund Contribution	Added t	
Zip	Country Zip			Country			8. This corporation owes the current year In	tangible	
24	25	25 29 30					Personal Property Tax.		
	9. Name and Address of Curr	ent Registered Agent					10. Name and Address of New Registered	Agent	
DEA	OFMED M. P.	*		81	Nam	е			
BESSEMER, W, K SAN 1103 TILTON RD				82	82 Street Address (P.O. Box Number is Not Acceptable)				
PT S	ST LUCIE FL 34952			83					3 3 3
				24	Cit.			85 Zip 0	Sada
				84	City		FL	1 1 '	1
	egistered agent, or both, in the Stat im familiar with, and accept the oblig Signature, typed or printed name of registered as	gations of, Section 607.0505, Flo	rida Statu	utes.		•	oration submits this statement for the purpose of n's board of directors. I hereby accept the appointment of the purpose of th	ntment as req	gistered
12.		AND DIRECTORS	13.	rigoni	(vigi icitai	D TOQUINGS	ADDITIONS/CHANGES TO OFFICERS AT	ND DIRECTO	RS IN 12
TITLE	P DELETE			1.1 TITLE				☐ Change	☐ Addition
NAME	BESSEMER,WM. J.			1.2 NAME					i
STREET ADDRESS	116 N. SEWALLS PT. RD		1.3 STREET ADDRESS			s			
CITY-ST-ZIP	STUART FL		1.4 CITY-ST-ZIP						
ππLE	V DELETE			2.1 TITLE			and the second of the second o	Change	☐ Addition
NAME	BESSEMER, MAXINE		2.2 NA	2.2 NAME					
STREET ADDRESS	116 SEWALLS PT RD.		2.3 STREET ADDRESS			s			
CITY-ST-ZIP	STUART FL	4	2. 4 Cf	TY-\$	T-ZIP				
TITLE SACS	Delete Delete		3.1 TIT	3.1 TITLE				Change	Addition
NAME	TILTON,C. NORRIS		3.2 NA	3.2 NAME					
STREET ADDRESS	155 RIVER COURT		3.3 ST	REET	ADDRES	s	• •		13.00
CITY-ST-ZIP	JENSEN BEACH FL		3.4. CI	TY-S1	r-ZIP			<u>-</u>	
TITLE	D	☐ DELETE	4.1 TIT	Œ				Change	☐ Addition
NAME	BESSEMER,WM. J.	e and the	4. 2 N/	ME					
STREET ADDRESS	166 N. SEWALLS PT RD.		4.3 \$T	REET	ADDRES	s			
CITY-ST-ZIP	STUART FL			4.4 CITY-ST-ZIP					
TITLE :	S DELETE		•	5.1 TITLE 5.2 NAME				☐ Change	Addition
NAME	BESSEMER, WM K.								
STREET ADDRESS	1003 TILTON RD.				ADDRES	S			
CITY-ST-ZIP	PT. ST. LUCIE FL	,	5.4 CIT		- ZIP	_			
TITLE	TOTAL STATE OF THE	☐ DELETE	6.1 TIT					☐ Change	Addition
NAME	BESSEMER, TAMARA A.		6.2 NA						
STREET ADDRESS	7270 SILVER OAK DR.		6.3 ST	REET	ADDRES	S			

CITY-ST-ZIP

PT. ST. LUCIE FL

14. I 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, with all other like empowered.

FILED

Jan 21, 1999 8:00am

Secretary of State 01-21-1999 90045 015 ***150.00