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PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

441858

Principal Place of Business

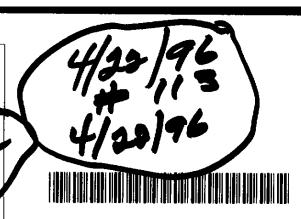
B/D SALES, INCORPORATED

Mailing Address

765 MARGARET STREET

765 MARGARIT STREET

(8)



JACKSON	VILLE FL 32204	JACKSONVILLE FL 32	204							
						3. Date incorporated or Qualified	3a. Date	of Last	Report	1
						12/17/1973		02/21	/1995	1
<u>⊢</u> ı	ace of Business	2a. Mailing Address				4. FEI Number			Applied For]
21		26				59-1498692			Not Applicable]
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired			75 Additional		
City & State	9	City & State				6. Election Campaign Financing			e Required	4
23	~	28				Trust Fund Contribution			.00 May Be ded to Fees	1
Ziρ	Country	Zip	Co	untry		8. This corporation has liability fo	r intangible ta:			1
24	25	29	30			1	s 🔲 No		0 1001002	
Name and Address of Current Registered Agent						10. Name and Address of New	Registered A	lgent		
				81 1	Name					1
BRYANT (F. OSBORN), JR.				82	Street Add	dress (P.O. Box Number is Not Accepta	ıble)			-
3047			Ш						_	
JACK	SONVLLE FL 32205			83						
				84 (City			85	Zip Code	1
11 Purcuent	to the provisions of Sections 607.0603 a	and EOZ 1EOG Florido Ptotutos	the sh				FL	بلبل		_
l or register	to the provisions of Sections 607.0502 a ed agent, or both, in the State of Florida th, and accept the obligations of, Section	 Such change was authorized 	by the	corpora	ation's bo	oration submits this statement for the plant of directors. It hereby accept the ap	urpose of chai pointment as i	nging its registeri	s registered office ed agent. I am	
SIGNATURE	Signature, typed or printed name of registered agent an	d title if applicable (NOTE	: Registere	id Agent si	gnature requi	red when reinstaling)	DATE		 	
12.	OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO OF	FICERS AND	DIREC*	TORS IN 12	18
TITLE	PD	☐ DELETE	1. 1 TITLE			1.] Change	e 🔲 Addition	CR2E034 (12/95)
NAME	BRYANT,F. OSBORN		1.2 (NAME						8
STREET ADDRESS	3047 COLLEGE STREET		1.3 5	CA 133RTS	DRESS					l E
CITY-ST-ZIP	JACKSONVILLE FL		1.4 (CITY-ST-Z	IP I]&
TITLE	D	DELETE		TITLE] Change	e 🔲 Addition	lo
NAME	BRYANT,FRANK O.,III		2.2]
STREET ADDRESS	P.O. BOX 71 N/A FRANKLIN SPRINGS GA		2.3 STR							
CITY-ST-ZIP TITLE	D	[] DELETE		CITY-ST-Z TITLE	IP			7 Change	e	┨
NAME	BRYANT, JOHN N	_		NAME			_	j Change	Z Nacition	
STREET ADDRESS	12577 ATTRILL	•		3.3 STREET ADDRESS						
CITY-ST-ZIP	JACKSONVILLE, FL 00000			CITY-ST-2						
TITLE	D	☐ DELETE	4. 1 T(TL				Γ) Change	e	1
NAME	BRYANT, THOMAS D.		4.2 1	NAME			_	-	—	
STREET ADDRESS	975 PERKINS PLACE		4.3.5	STREET AD	DRESS					
CITY - ST - ZIP	JACKSONVILLE, FL 00000	<u> </u>	4.4 CITY		IP					
TITLE	STD	C) DELETE	5. 1 TITLE		T] Change	Addition	1
NAME	BRYANT, SCOTT P.			5.2 NAME						
STREET ADDRESS	975 PERKINS PLACE		5.3 \$	STREET AD	DRESS					
CITY-ST-ZIP	JACKSONVILLE, FL 00000		_	017Y-\$1-Z	IP .		 			1
THILE	D	☐ DELETE		6 1 TITLE] Change	Addition	
NAME	BRYANT, SCOTT P.			IAME						
STREET ADDRESS	4358 TIMUQUANA RD.			STREET ADI						
CITY-ST-ZIP	JACKSONVILLE FL v certify that the information supplied will	th this filing is valuntarily fundal		HTY-ST-Z		for the averaging shaked in C. C. and	07/0/4) 5:			1

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