FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS (9) **DOCUMENT #** BEDLEY ENTERPRISES, INC. Principal Place of Business Mailing Address 4815 RIVERHILLS DR 4815 RIVERHILLS DR **TAMPA FL 33617** TAMPA FL 33617 3a. Date 02/14/1995 3. Date is represented or Qualified 2. Principal Place of Business 4. FEI N. 59-1660553 2a. Mailing Address Applied For 21 26 Not Applicable Suite, Apt. #. etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 \mathbf{x} 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Country Zio Country 8. This corporation has liability for intangible tax under s 199.032, 24 25 29 30 Yes No Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 61 BEDLEY, EDGAR N. 5620 E. BUFFALO AVE. 82 Street Address (P.O. Box Number is Not Acceptable) **TAMPA FL 33619** 83 84 City 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, typical or printed numic of registered agent and still if applicable (NOTE: Registered Agent signature required when reinstating) PD OFFICERS AND DIRECTORS 12. (12/95) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE ULE 1 1 TITLE Change Addition BEDLEY, EDGAR N. NAME 1.2 NAME CR2E034 4815 RIVERHILL DRIVE STREET ADDRESS 1.3 STREET ADDRESS TAMPA FL 1 4 CITY - ST- ZIP ς ... TILE DELETE 2. 1 TITLE Change ■ Addition BEDLEY, DELORES J NAME 2.2 NAME **4815 RIVERHILL DRIVE** STREET ADDRESS 23 STREET ADDRESS TAMPA FL CHY-S1-7IF 24 CITY-ST-ZIP TIL.F DELETE 3 1 TITLE Change ■ Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CHY \$1-20P 3.4 CITY - ST - ZIP DELETE 4. 1 TITLE ☐ Change ■ Addition NAME 42 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY ST ZIF 4 4 CITY - S1 - ZIP lif,£ DELETE 5 1 TITLE Change ■ Addition RAME 5.2 NAME STREET ADDRESS 5 3 STREET ADDRESS CIY-SI-ZP 5 4 C(1) - ST - Z(P THE DELETE 6 1 TiTLE ☐ Change ☐ Addition NAM: 62 NAME STREET ADDRESS. 63 STREET ADDRESS CITY - ST - 7/E 64 CITY - ST - ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 call; 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:

Sally Delores J Bedley 2/30/96 113-915-9619
Day Dale Day Dale Day Delores