

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Northing
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 583790 (1)

1. Corporation Name
BASTEDO, INC.

95 MAY -1 AM 9:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

531 MAIN ST
DUNEDIN FL 34698
US

Mailing Address

531 MAIN ST
DUNEDIN FL 34698
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
08/30/1978

3a. Date of Last Report
03/04/1994

2. Principal Place of Business

21

2a. Mailing Address

26

4. FEI Number
59-1873017

Applied For
Not Applicable

State, Apt. #, etc.

22

State, Apt. #, etc.

27

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

City & State

23

City & State

28

6. Election Campaign Financing
In-Paid Contributions ☐

\$5.00 May Be
Added to Fees

Zip

24

Country

25

Zip

29

Country

30

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**BASTEDO, ELEANOR K.
160 FLORIDA AVE.
DUNEDIN FL 34698**

10. Name and Address of New Registered Agent

81 Name **Cooper, Barbara**
82 Street Address (P.O. Box Number is Not Acceptable)
1037 Mary Jane Lane
83
84 City **Dunedin** **FL** 85 Zip Code **34698**

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: *Barbara W. Cooper, Broker* 4/27/95

12. OFFICERS AND DIRECTORS

TITLE	PST
NAME	BASTEDO, ELEANOR
STREET ADDRESS	527 MAIN STREET
CITY, ST, ZIP	DUNEDIN FL
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PSTD ☒ Change ☐ Addition
1.2 NAME	Barbara Cooper
1.3 STREET ADDRESS	531 Main St.
1.4 CITY, ST, ZIP	Dunedin, FL 34698
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY, ST, ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY, ST, ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY, ST, ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY, ST, ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 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)(b), Florida Statutes. Further, I 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: *Barbara W. Cooper, Broker* 4/27/95 813/734-5464