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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 589212

(0)

H.G. BODDIFORD PAINTING CONTRACTOR, INC.

SECRETARY OF STATE OIVISION OF CORPORATIONS

97 JUL 23 PH 2: 47



									[[			828# BIBH BIBH	EIRIA IIII	
Pi	rincipal Place	e of Business		М	lailing Address				'"	DOTAL BILDI IZIIN IZIIN IIDAI ELNEV LI	#1 #1#11 #1#II		E1811 1981	
					20 RIVER BLVD. MPA FL 33603-1928									
										e Incorporated or Qualified		ate of Last R 20/1996	leport	
2. Principal Place of Business					2a. Mailing Address								oplied For	]
21				26	26				<b>59-1852383</b> Not Ap			ot Applicable		
Suite, Apt. #, etc.					Suite, Apt. #, etc.				& Cer	tificate of Status Desired			Additional	
22				27					<b>3.</b> Cel	uncate of Status Desired		Fee Re	equired	
City & State				ļ	City & State				1	ction Campaign Financing	_		May Be	
23		<del> </del>	<u>-</u>	28						st Fund Contribution	_ بـ		to Fees	
_		Zip Country			Zip Country				8. This corporation has liability for intangible tax under s. 199.032,					1
24	<u> </u>	25 9. Name and Address of Current			29 30				Florida Statutes Yes No  10. Name and Address of New Registered Agent					-
-			<del></del>	urrent Regis	stered Agent		B1	Name	TU, INA	THE BILL ACCIONS OF NEW IN	eñistai en	whatir		-
		ODIFORD, H.						EL		. Bodator	ત			╛
		RIVER BLV						Street Ado	iress (P.O. I	Box Number is Not Accepte	able)			
TAMPA FL 33603								73	≺ <u>~</u> \	Civer Blue				$\dashv$
							B3	r						╛
							84	City	Bmp	ι <b>Λ</b> .	FL	85 Zip	26°03	
4	1 Purement t	to the provision	ns of Sections 60	7 0502 and F	507 1508 Florida Stati	utes the a	bove	-named cor	rnoration su	<i>VY</i> hmits this statement for the				-
	office or re	egistered ager	nt, or both, in the	State of Flori	ida. Such change was of, Section 607,0505, I	authorize	d by	the corpora	ation's board	bmits this statement for the difference of the directors. I hereby accurately	opt the app	ointment as	registered	
<u> </u>			4/2.1	Zaldis.	Zio	ionda ola	10103	•			7/19	3/57		
5	IGNATURE >	gnature, typed or	printed name of registe	red agent and the	e applicable (NO	DTE Registere	od Ager	nt signature requ	u red when reins:	ating)	<b>L</b> ATE	<u> </u>	· · · · · · · · · · · · · · · · · · ·	
1	2.	1	OFFICER	S AND DIRE		13.			ADD	ITIONS/CHANGES TO OFF	ICERS AND			6
10	TLE	PD			DELETE	1.1 T	ITLE		20			Change	Addition	١è
N/	AME	BODDIFOR		🔿		1.2 N	IAME		-1 D					8
SI	TREET ADDRESS	4820 RIVE		Dec	enser	1.3 \$	TREET	AQDRESS	7					١ř
C	TY-ST-ZIP	TAMPA FL					IIV-SI							_  <u>β</u>
TI	TLE	DP			☐ DELETE	224		;		: پر پیشن پیشن پیشن کستان بیشن پیشن		☐ Change	☐ Addition	15
N/	AME	BODDIFOR				22 N				8000023 -07/29	# <b>&gt; U</b>	4000 1004	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
Si	STREET ADDRESS 4820 RIVER BLVD							ADDRESS		"U17.63/ #####10	.C. UU	1054***() ****	<i>)0,0</i> 20 00	
-	TY-ST-ZIP	TAMPA FL			Floriere		CHY-S	1719		कककक⊥र	00.00			4
	TLE				☐ DELETE	3.1 T		r				Change	Addition	
	AME					3.2 N								İ
	TREET ADDRESS							ADDRESS		•				
<del></del>	TY-ST-ZIP				DELETE	3.4. 0 4.1 T	CITY-S	I-ZIP				Change	Addition	+
	TLE				F-1 occus							oninge	redition	
	AME					4.21		annotee						
	TREET ADDRESS							ADDRESS						
	ITY-ST-ZIP				DELETE	4.4 C 5.1 T	ITY S	- (H'				Change	Addition	-
	TLE											- vinings	Aounon	
	AME					5.2 N		+CODEC*						
	TREET ADDRESS							ADDRESS						
	TY-ST-Z#				DELETE		11Y- \$1	- (1)		,	<del></del>	Change	Addition	$\dashv$
i '	TLE .				□ ptrc ig	6.1 T						☐ anunde	A0000001	
[	AME					6.2 N		A D D D E A A				0/22		
	TREET ADDRESS							ADDRESS				KW	M	
l Ci	TY-ST-7IP					■ 6.4 C	HTY-S1	-71P						- 1

I do 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.

9