


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

FILED
Feb 27 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT #
1. Corporation Name

635154

PERRY BUSH, INC.

Principal Place of Business

Mailing Address

10330 Avon Park Cutoff Road
Fort Meade, FL 33841-9390

3. Date Incorporated or Qualified
9/15/79

3a. Date of Last Report
1/96

2. Principal Place of Business

2a. Mailing Address

21 same

26 same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

4. FEI Number

59-1935903

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Perry Bush, President
10330 Avon Park Cutoff Road
Fort Meade, FL 33841-9390

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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

X Perry Bush Pres

(NOTE: Registered Agent signature required when reinstating)

DATE

Feb 25 1997

12.

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

President

☐ DELETE

NAME

Perry Bush

STREET ADDRESS

10330 Avon Park Cutoff Road

CITY-STATE-ZIP

Fort Meade, FL 33841

TITLE

Director

☐ DELETE

NAME

Lucy Bush

STREET ADDRESS

10330 Avon Park, Cutoff Road

CITY-STATE-ZIP

Fort Meade, FL 33841

TITLE

Director

☐ DELETE

NAME

Betty Barbaree

STREET ADDRESS

505 South Young Avenue

CITY-STATE-ZIP

Avon Park, FL 33825

TITLE

Director

☐ DELETE

NAME

Winona Crews

STREET ADDRESS

3091 North Cambridge Road

CITY-STATE-ZIP

Avon Park, FL 33825

TITLE

Director

☐ DELETE

NAME

Marjory Newberry

STREET ADDRESS

Rt 2, Box 626A

CITY-STATE-ZIP

Avon Park, FL 33825

TITLE

Director

☐ DELETE

NAME

Harold Bush

STREET ADDRESS

10100 Avon Park, Cutoff Road

CITY-STATE-ZIP

Fort Meade, FL 33841

1.1 TITLE

☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE

☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE

☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE

☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE

☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

600002100698
-02/28/97--01012--014
***165.00

032

14. 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 I changed, or on an attachment with an address.

SIGNATURE:

X Perry Bush Pres Feb 25 1997

Date

Daytime Phone #

(941) 635-3314

CR2E034 (9/96)