

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

FILED
Apr 15 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 # 652956

(4)

1. Corporation Name

B.J. PROPERTIES, INC.

Principal Place of Business

4700 PINE ISLAND ROAD, N.W. (33909)
P.O. BOX 66
MATLACHA FL 33909-7066

Mailing Address

4700 PINE ISLAND ROAD, N.W. (33909)
P.O. BOX 66
MATLACHA FL 33993-9783



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 01/22/1980		3a. Date of Last Report 02/13/1996		
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-2001665		Applied For Not Applicable		
22	City & State	27	City & State	5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required		
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees		
24	33993	25	Country	29		33993	30	Country
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent				
GLUHAREFF, ALEXANDER M 4700 PINE ISLAND ROAD, N.W. MATLACHA FL 33909				81 Name				
				82 Street Address (P.O. Box Number is Not Acceptable)				
				83				
				84 City				
				FL 85 Zip Code 33993				

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

Alexander M. Gluhareff, Pres.

4/11/97

(Signature, typed or printed name of registered agent and title, if applicable) (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	XX Change ☐ Addition
NAME	GLUHAREFF, ALEXANDER M	1.2 NAME	
STREET ADDRESS	4700 PINE ISLAND RD, NW	1.3 STREET ADDRESS	
CITY-ST-ZIP	MATLACHA, FL 00000	1.4 CITY-ST-ZIP	33993
TITLE		2.1 TITLE	☐ Change ☐ Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 or is changed in an attachment with an address.

SIGNATURE

Alexander M. Gluhareff, Pres.

4/11/97

CR2E034 (9/96)