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NONPROFIT CORPORATION **ANNUAL REPORT** 



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

,	MENI# 728								
BETHE	ESDA, INC.					 	AHEI DIR ANDI	BIRS DIRK BIR	
Principal Place	e of Business	Ma:lir	ng Address						
240 14TH AVE. S. 240 14TH AVE. S. JACKSONVILLE BEACH FL 32250-6318 JACKSONVILLE BEACH I				H FI 32250.631	ı s				
UNONCONTIL	ELL DENOTITE GEESO COTO	ųn,	OROGITALLE BENO	1116 32230 001		Date Incorporated or Qualified	4 39	Date of Last	Banort
						02/28/1974	Jul.	05/01/1	
. Principal Pl	lace of Business		lailing Address			4. FEI Number			Applied For
Suite, Apt.	+ ato	26	uito Ant # ata			23-7380515			Not Applicable
Suite, Apr.	#, etc.	27	uite, Apt. #, etc.			5. Certificate of Status Desired			Additional Required
City & State	e	<del></del>	ity & State		·	6. Election Campaign Financing			O May Be
]		28				Trust Fund Contribution			d to Fees
Zip 1	Country	Z:	þ	Country	1	8. This corporation has liability for			199.032,
<u> </u>	25 9. Name and Address of	Current Register	ed Agent	[30]		Florida Statutes  10. Name and Address of New	Yes [		
	9. Name and Address of	Correct negister	en waent	81	Name	IU. Name and Address of New	Hegistere	o Agent	
HINTE	D EDANIY								
HUNTER, FRANK 240 14TH AVE. S.				82	Street Addi	ress (P.O. Box Number is Not Accept	able)		
	ONVILLE BEACH FL 32250	)		83					
				84	City			OC   75	Code
					Oity		F		o Çode
1 Pursuant									
or register	to the provisions of Sections 61 red agent, or both, in the State	17.0502 and 617.1	508, Florida Statut	tes, the above-	named corpor	ation submits this statement for the p	ourpose of c	changing its r	egistered offic
or register	to the provisions of Sections 61 red agent, or both, in the State ith, and accept the obligations of the control of the cont	of Florida. Such ch	hange was authoriz	zed by the corp	named corpor poration's boar	ation submits this statement for the p rd of directors. I hereby accept the ap	ourpose of o pointment a	changing its r as registered	egistered offici agent. I am
or register familiar wi IGNATURE	red agent, or both, in the State ith, and accept the obligations of	of Florida. Such ch of, Section 617.050	hange was authoriz 03, Florida Statutes	zed by the corp s.	oration's boar	rd of directors. I hereby accept the ap	pointment	changing its reas registered	egistered offici agent. I am
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SIGNATURE:

SIGNATURE AND TYPED OR PHINTED NAME of SIGNING OFFICER OR DIRECTOR

5-1-96 904-241-1565