SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 8/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F27931

(7)

B. V. N. ENTERPRISES, INC.

FIL	LED
Sep 15 19	97 8:00am
Secretar	y of State

|--|

Principal Place	e of Business	Mailing Address							
5601 N A1A 103 N PO BOX 3024 VERO BEACH FL 32064		5601 N A1A 103 N							
		PO BOX 3024 VERO BEACH FL 32984				DO NOT WR	DO NOT WRITE IN THIS SPACE		
VENO DENON FI	L Ogeov	VEHO DENVITTE DEDOT				3. Date Incorporated or Qualifie	d 3a. [Date of Last R	eport
						04/01/1981	07/	12/1996	
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		⊢	plied For
21		26				59-2778901			t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	X	\$8.75 / Fee Re	
22		City & State	 			6. Election Campaign Financing			
City & State	в	28				Trust Fund Contribution		\$5.00 Added	
Zip	Country	Zip	Cou	intry		8. This corporation owes or has			
24	25	29	30	-		Personal Property Tax due Ju			No
	9. Name and Address of Current	Registered Agent				10. Name and Address of New	Registered	Agent	
MYER	RS, JAMES L JR			81	Name				
	N A1A 103 N			82	Street Addr	ess (P.O. Box Number is Not Accep	table)		
VERC	BEACH FL 32964								
				83					
				84	City		FI	-	Code
office or r	to the provisions of Sections 607.0502 registered agent, or both, in the State im familiar with, and accept the obliga	of Florida. Such change was	authorize	d by	the corporat	poration submits this statement for the ion's board of directors. I hereby ac	e purpose cept the ap	of changing it pointment as	s registered registered
SIGNATURE	Signature, typed or printed name of registered ager	s and title if applicable (NO	TF Benistere	d Age	nt signature regula	red when reinstating)	DATE		
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OF	FICERS AN	ID DIRECTOR	IS IN 12
TITLE	VD VD	DELETE	1.1 TI	TLE				Change	☐ Addition
NAME	NORDBERG, JEAN E		1.2 N	AME					
STREET ADDRESS	11041 BRANCHING HORN RD		1.3 ST		ADDRESS				
CITY-ST-ZIP	EDEN PRARIE, MN 55437		1.4 C	ITY-S	T-ZIP				
TITLE	PTD	DELETE	2.1 TI	TLE				Change	Addition
NAME	NORDBERG, BRUNO V		2.2 N	AME					
STREET ADDRESS	5601 N A 1 A HGY, 103N				ADDRESS				
CITY-ST-ZIP	VERO BCH, FL 32964	— — — — — — — — — — — — — — — — — — —	_		ST-ZIP			Change	Addition
TITLE	VSD	☐ DELETE	3.11					C Ollange	L. AUUIIIOII
NAME	NORDBERG, JOAN A		3.2 N		*DDDCCC				į
STREET ADDRESS	5601 N A 1 A HGY, 103N VERO BCH, FL 32964				ADDRESS				
CITY-SI-ZIP TITLE	VERO DOR, FL 32804	☐ DELETE	3.4. C		ST- ZIP			☐ Change	Addition
NAME			4.21						
STREET ADDRESS			1		ADDRESS				
CITY-ST-ZIP	•				ST-ZIP				
TITLE		DELETE	5.17					Change	Addition
NAME			5.2 N	AME	[
STREET ADDRESS			5.3 S	TREET	ADDRESS				
CITY-ST-ZIP			5.4 C	ITY-S	ST - Z(P				
TITLE		☐ DELETE	6.1 T	TLE				☐ Change	☐ Addition
NAME			6.2 N	AME					
STREET ADDRESS			6.3 S	TREET	ADDRESS				
CITY-ST-ZIP					ST-ZIP				
14. Ldo bere	by certify that the information supplied	with this filing does not qua	lify for the	exe	mption stated	d in Section 119.07(3)(i), Florida Sta	tutes. I furth	er certify that	the

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 receive of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 03 if changed, or on an attrichment with an address.