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

**PROFIT** CORPORATION ANNUAL REPORT

1997

FB, INC.



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F67561

(3)

**FILED** Feb 04 1997 8:00am Secretary of State



					····				
7800 BELFOR	ce of Business RT PARK WAY E BOX 19277 LE FL 32245-9277	POST OFFICE BOX 1827	Mailing Address 7800 BELFORT PARK WAY POST OFFICE BOX 18277 JACKSONVILLE FL 32245-9277			5/(1/424) 5/(19 3115) (1)	arasi apasi Gigit Big	14 #1 <b>8</b> 11 <b>(</b>	··•·· 109!
						3. Date Incorporated or Qualified 02/17/1982 04/28/1996			
2. Principal	Place of Business	2e. Mailing Address	2a. Mailing Address			4. FEI Number	<u> </u>		olied For
21		26				59-2164873			Applicable
Suite Apt		Suite, Apt. #, etc.				5. Certificate of Status Desired	1 7 1	. <b>/5</b> Ac	dditional quired
City & Sta	ate	City & State				Election Campaign Financing     Trust Fund Contribution		.00 k ded to	May Be Fees
Zip	Country	Zíp	Cou	untry		8. This corporation has liability for it	ntangible tax un	der s.	199.032,
24	25	25 29 30				Florida Statutes 🙀 Yes 🗌 No			
	9. Name and Address of Curren	t Registered Agent		ļ		10. Name and Address of New Re	istered Agent		
	ARNHARDT, FRANK L.			81	Name				
183 WATER OAK DRIVE				82	Street Addr	ress (P.O. Box Number is Not Acceptable)			
PC	ONTE VEDRA FL 32082								
				83					
				84	City	,,	FL 85	Zip C	ode
11 0	I to the service are of Continue CO7 OFO	12 and 607 1609 Flavida State	don the e	boug	namad sar	poration submits this statement for the p	7	nioa ite	ragistared
office or agent 1	r registered agent, or both, in the State am familiar with, and accept the obliga	ol Florida. Such change was atons of Section 607,0505. F	authorize Iorida Sta	id by t tutes.	he corporat	tion's board of directors. I hereby accep	t the appointme	nt as r	egistered
SIGNATURE						•			
SIGNATURE	Signature, type-1 or printed name of registered ago	ort and title it applicable (NC	TE: Registere	nd Agent	signature requir	red when reinstaling)	DATE		1
12.	OFFICERS AN		13.		·····	ADDITIONS/CHANGES TO OFFIC			print
TITLE	P PARTITION FRANK!	DELETE	1.1 Ti	ITLE			L. Ch	ange	Addition
NAME	BARNHARDT, FRANK L.		1.2 N	AME					
STREET ADDRESS			1.3\$	TREET A	Doress				
CITY - ST - 7IP	PONTE VEDRA FL			ITY-ST-	ZIP				E 1 2 186
TITLE	PADAHLADDY CLIZABETH	☐ DELETE	217		-		☐ CH	ange	Addition
NAME	BARNHARDT, ELIZABETH 183 WATER OAK DRIVE		22 N						
STREET ADDRESS	PONTE VEDRA FL			TREET A	1				
CHTY - ST - ZIP	ST ST	DELETE		CITY-ST	-ZIP		□ Cr		Addition
TITLE	POOLE, EVA M.	Find bettift	31 T 32 N				LJ (/	anyo	L.J AGUILION
NAME STREET AODRESS	ATAN DOVAL LAVES DONE		1	IAME TREET AL	nnerss				
CITY-SI-7/2	JACKSONVILLE FL		1	CITY-ST	1				
TITLE		☐ DELETE	4.1 7		- 41		☐ Ch	ange	Addition
NAME		- ·-	- E	NAME				-	· <del>-</del> · ·
STREET ADDRESS	s			TREET A	DDRESS				
CITY-ST-7:P				HTY-ST-	l l				
TITLE		DELETE	5.1 T				CI	ange	Addition
NAME			5.2 N	IAME	1				
STREET ADORESS	s		5.3 S	TREET A	DDRESS				
CITY-S1-ZIP				CITY-SI-	i				
TITLE		DELETE	61 T				Cr	iange	Addition
NAME			6.2 N	IAME		•			
STREET ADDRESS	s		6.3 S	STREET A	ODRESS				
					1				

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 if changed, or on an attachment with an address.

January 9,1996

904-646-0770