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

**PROFIT** CORPORATION ANNUAL REPORT

1997

STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

May 02 1997 8:00am

Secretary of State

a da beine bige belle antill diete natif bate affer alber arter anne arete biete alber

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # F75690

(0)

THE BARTLETT GROUP, INC.

Principal Place of Business Mailing Address						a simblemen title sennet martin mersin sinde mate	Milit dilli	HAN BIRK BIRK	#1#11 (##)
200 E. ROBINSON STREET. SUITE #1170 200 E. ROBINSON STREET ORLANDO FL 32801-1962				#11°	70				
						3. Date Incorporated or Qualified	3a. Da	te of Last R	eport
						04/09/1982 04/09/1996			
2. Principal Place of Business 2a. Mailing Address						4. FEI Number			plied For
21 26						59-2179760		·	ot Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & Stat	0	City & State				Election Campaign Financing     Trust Fund Contribution		\$5.00 Added 1	
Zip 24	Country 25	Ζίρ <b>29</b>	30 Co.	intry	1	8. This corporation has liability for Florida Statutes	intangible Yes		. 199.032,
	9. Name and Address of Curre	ent Registered Agent				10. Name and Address of New Re	gistered a	Agent	
CAV	ANO, RICHARD J.			81	Name		_		-
200 E. ROBINSON STREET SUITE 1170				82	Street Addr	ress (P.O. Box Number is Not Acceptat	ole)		
	ANDO FL 32801			83		The state of the s		***************************************	
				84	City		FL	85 Zip (	Code
office or r agent. La SIGNATURE	m familiar with, and accept the obli	gations of, Section 607.0505, F	lorida Stal	utes	3.	coration submits this statement for the plant's board of directors. I hereby accept	DATE	changing it ointment as	s registered registered
12.	\$ grader: typed or profed name of registered a	gent and title if approprie (NL ND DIRECTORS	13.	o Age	ent signature requi	red when reinstating) ADDITIONS/CHANGES TO OFFIC		DIRECTOR	S IN 12
TOTALE	DCS	DELETE		1.1 TOLE		7.557.61.07.51.11.02.51.0		Change	Addition
NAME	CAVANO, JOHN P., JR.		1	1.2 NAME					
STREET ADDRESS	200 E. ROBINSON ST.		•		ADDRESS				
CHTY - \$1 - 712	ORLANDO FL		<b>1</b>		1				
DILE	DPT			1.4 CITY - ST - ZIP 2.1 TITLE				Change	Addition
NAME	CAVANO, RICHARD J.		2.2 N	2.2 NAME					
STREET ADDRESS	200 E. ROBINSON ST.		2.3 STREET ADDRESS		ADDRESS				
CITY: S1:7/P	ORLANDO FL				ST-ZIP				
T-TLE	V			3.1 TITLE				Change	Addition
NAME	EUTIZE, WALTER J	E. WALTER J 32		AME					
STREET ADORESS	200 E. ROBINSON ST.		3.3 \$	IREET	ADDRESS				
CITY - ST - ZIP	ORLANDO FL	• /	3.4.0	HTY-S	ST-Z#P				
THEE	V	DELETE						Change	Addition
NAME .	STOUT, ROBERT L		4. 2 NA						
STREET ADDRESS	200 E ROBINSON ST				ADDRESS				
CITY-ST-ZIP	ORLANDO FL		1		ST-ZIP	•			
TITLE			5.1 Ti					Change	Addition
NAME			5.2 N	AME					
STREET ADDRESS			5.3 S	TREET	ADDRESS				
CITY - ST - ZIP					T-21P				•
TITLE		☐ DELETE	6.1 Tr					Change	Addition
NAME			6.2 N						

6.3 STREET ADDRESS 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 if changed, or on an attachment with an address.