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

**PROFIT CORPORATION ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT #

1. Corporation Name

F88016

(3)

**FILED** Feb 25 1998 8:00am Secretary of State

BRAD	SHAW HOLDINGS, INC.					
Principal Plac	ce of Business	Mailing Address			- i sanijan man man mun nam asmi mana m	TINI TIDIN BIBIN TIDIN DIBIN BIBIN DIDIN NODI
500 AZALEA LANE VERO BEACH FL 32963		500 AZALEA LANE VERO BEACH FL 32963				
						E IN THIS SPACE
					3. Date Incorporated or Qualified	
					07/01/1982	
· ·	Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21 Suite, Apt	# Ato	Suite, Apt. #, etc.			59-2199899	Not Applicable
22		27		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred	
City & Sta	te	City & State			# Floation Compaign Financing	
23		28			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be ☐ Added to Fees
Zip	Country	Zip	Country		8. This corporation owes or has p	
24	25	29	30		Personal Property Tax due June	
	9. Name and Address of Currer		1-71		10. Name and Address of New Re	
R	RADSHAW, CHARLES, J.		B1 Na	ame		
500 AZALEA LANE				not Adden	ess (P.O. Box Number is Not Accepta	blet
	ERO BEACH FL 32963		<b>82</b> St	eet Addre	ss (P.O. Box Number is Not Accepta	bie)
•	STO OBTOTT E OEOOO		83			
			84  Ci	ly		FL 85 Zip Code
	to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the oblig	2 and 607.1508, Florida Statu of Florida. Such change was ations of, Section 607.0505, Fl	tes, the above-nar authorized by the orida Statutes.	med corpo corporation	oration submits this statement for the on's board of directors. I hereby acce	purpose of changing its registered pl the appointment as registered
SIGNATURE	Signature, typed or printed name of registered age	est and title if applicable. (NO)	E: Registered Agent sig	nature require	d when reinstating)	DATE
12.	OFFICERS AN	D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12
TETLE	DVS	DELETE	1.1 TITLE			☐ Change ☐ Addition
NAME	MACHEN, JIM D.		1.2 NAME			
STREET ADDRESS	951 SW 4TH AVE.		1.3 STREET ADDR	ESS		
CITY-ST-ZIP	BOCA RATON FL		1.4 CITY-ST-ZIP			
TITLE	PD	DELETE	21 TITLE			Change Addition
NAME	BRADSHAW, CHARLES J		22 NAME			
STREET ADDRESS	500 AZALEA LANE		2.3 STREET ADDR	ess	•	F ;
CITY-ST-ZIP	VERO BCH, FL 00000		2. 4 CITY - ST - ZIF	,		
TITLE	DST	☐ DELETE	3.1 TITLE			Change Addition
NAME	HOLDERMAN, ELIZABETH H		3.2 NAME			
STREET ADDRESS	500 AZALEA LANE		3.3 STREET ADDR	ESS		
CITY-ST-ZIP	VERO BEACH FL		3.4. CITY-ST-ZIP			
TITLE		DELETE	4.1 TITLE			Change Addition
NAME			4. 2 NAME			l
STREET ADDRESS			4.3 STREET ADOR	ESS		
CITY-ST-ZIP	_		4.4 CITY - ST - ZIP			
TITLE		DELETE	5.1 TITLE	•		Change Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDR	ESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		☐ DELET <b>E</b>	6.1 TITLE			☐ Change ☐ Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDR	ESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP			f

14. I 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.