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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F88016

BRADSHAW HOLDINGS, INC.

FILED Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90182 005 ***150.00



					[
Principal Place	of Business	Mailing Address			
500 AZALEA LA		500 AZALEA LANE			
VERO BEACH F	L 32963	VERO BEACH FL 32963			DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualifed
					07/01/1982
2 Data de al Di	of Duciness	2a. Mailing Address			4. FEI Number Applied For
─ '	ace of Business	<u> </u>			59-2199899 Not Applicable
21		26 Suite Ant # etc			39-2199099 *********************************
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired Fee Required
22		City & State			A-00
City & State		⊢ , ′			6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees
23		Zip Country		,	
Zip	Country	_ ├─¬ `	_ ´		8. This corporation owes the current year Intangible Personal Property Tax.
24	25		<u>'l</u>		10. Name and Address of New Registered Agent
	9. Name and Address of Current	Registered Agent	81	Name	
BDVI	OSHAW, CH ARLES , J.				
500 AZALEA LANE			82	Street	et Address (P.O. Box Number is Not Acceptable)
	D BEACH FL 32963	83			
VERC	DEACH FL 32903		63		
			84	City	FL 85 Zip Code
) 1 COZ 1500 Florido Statutos	the show	o named	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE					
O/O/O/O/CE	Signature, typed or printed name of registered agent			nt signature	are required when reinstating) DATE
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DVS	☐ DELETE	1.1 TITLE		Change Addison
NAME	MACHEN, JIM D.		1.2 NAME		
STREET ADDRESS	951 SW 4TH AVE.		1.3 STREE	TADDRESS	SS
CITY-ST-ZIP	BOCA RATON FL		1.4 CITY-S	T-ZIP	☐ Change ☐ Addition
TITLE	PD	☐ DELETE	2.1 TITLE		Change Addition
NAME	BRADSHAW, CHARLES J		2.2 NAME		
STREET ADDRESS	500 AZALEA LANE		2.3 STREE	T ADDRESS	SS
CITY-ST-ZIP	VERO BCH, FL 00000		2.4 CITY-5	ST-ZIP	
TITLE	DST	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	HOLDERMAN, ELIZABETH H		3.2 NAME		
STREET ADDRESS	500 AZALEA LANE		3.3 STREE	T ADDRESS	ss
CITY-ST-ZIP	VERO BEACH FL		3.4 CITY-	ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREE	T ADDRESS	ss
CITY-ST-ZIP			4.4 CITY-5		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS		1	5.3 STREE	T ADDRESS	ss
		1	5.4 CITY-5	ST-ZIP	
CITY-ST-ZIP TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition
!			6.2 NAME		
NAME			1	TADDRESS	ess
STREET ADDRESS			6.4 CITY-5		
CITY-ST-ZIP			0.4 CHY-S	51-ZIP	the control of the co

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 of 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 chapted open an attackment with an address, with all other like empowered.

SIGNATURE:

STENATURE AND TYPED OR PRINTED MAKE OF SIGNING OFFICER OR DIRECTOR

3.15 - 29 Date

23).025 Daytime Phone #