FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #
1. Corporation Name F89181 (4)

B & B OF GREENVILLE, INC.

Principal Place of Business Mailing Address



| 28. Mailing Address 26. Suite, Apt. #, etc. Suite, Apt. #, etc. 27. Suite, Apt. #, etc. 27. City & State City | % BERYLE I 120 NORTH GREENVILLE | | % BERYLE R. \$ P. O. BOX 248 GREENVILLE FL US | | 3. Date Incorporated or Qualified 06/01/1982 | 3a. Date of Last Report 05/01/1995 | |
|--|---------------------------------------|--|---|--|--|------------------------------------|--|
| Safe April F, etc. Safe F, | | of Business | 2a. Mailing Addres | S | 4. FEI Number | Applied For | |
| 20 | 21 | | | , | 59-2206332 | | |
| Addition | 1 | | | tc. | 5. Certificate of Status Desired | | |
| 294 | City & State | 9 | F 1 | | , , | | |
| SCARBORO, BERYLE R 120 NORTH GRAND ST GREENVILLE FL 32331 51 522 Street Address (F.O. Box Number is Not Acceptable) 53 Number of Not Acceptable) 54 City 55 Street Address (F.O. Box Number is Not Acceptable) 55 Street Address (F.O. Box Number is Not Acceptable) 56 City 57 FL 88 Zip Code 58 Zip Code 58 Zip Code 59 City FL 88 Zip Code 59 Zip Code 59 City FL 88 Zip Code 50 City FL 88 Zip Code 51 Number is Not Acceptable) 52 Street Address (F.O. Box Number is Not Acceptable) 53 Zip Code 54 City 55 City FL 88 Zip Code 56 Zip Code 57 City Street Address (F.O. Box Number is Not Acceptable) 58 Zip Code 59 Zip Code 59 Zip Code 50 City Street Address (F.O. Box Number is Not Acceptable) 59 Zip Code 50 City Street Address (F.O. Box Number is Not Acceptable) 50 Zip Code 51 City FL 88 Zip Code 51 Zip Code 52 Zip Code 53 Zip Code 54 City 55 Zip Code 56 Zip Code 57 Zip Code 58 Zip Code 59 Zip Code 59 Zip Code 50 Zip Code 50 Zip Code 50 Zip Code 51 Zip Code 51 Zip Code 51 Zip Code 52 Zip Code 53 Zip Code 54 City 55 Zip Code 56 Zip Code 57 Zip Code 57 Zip Code 58 Zip Code 59 Zip Code 59 Zip Code 50 Zip Code 50 Zip Code 50 Zip Code 50 Zip Code 51 Zip Code 51 Zip Code 51 Zip Code 52 Zip Code 53 Zip Code 54 City 55 Zip Code 56 Zip Code 57 Zip Code 58 Zip Code 58 Zip Code 59 Zip Code 59 Zip C | Zip | Zip Country Zip | | Country | 1 | 1 2 1 | |
| SCARBORO, BERYLE R 120 NORTH GRAND ST GREENVILLE FL 32331 84 City FL 85 Zip Code 11. Passaret to the provisions of Sections 607,0502 and 607,1508, Finitive Statistics, the above named corporation exhanist this statement for the purpose of changing list registered agent, or both, in the State of Finitive Statistics. SIGNATURE Signature Statistics | 24 | | | 30 | | | |
| SCARBORO, BERYLE R 120 NORTH GRAND ST GREENVILE FL 32331 84 City FL 65 City | | 9. Name and Address of Curre | nt Registered Agent | O1 Non | and the control of th | Registered Agent | |
| 120 NORTH GRAND ST GREEN/ILLE FL 32331 84 | | | | - | | | |
| 83 | | | | 82 Stre | 82 Street Address (P.O. Box Number is Not Acceptable) | | |
| State Addition State Addition State Addition State Addition | | | | 83 | | | |
| 11. Pursient to the provisions of Sections 607.05.02 and 607.15.08; 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. Thereby accept the appointment as registered agent. I am registered agent. I am state of registered agent. I am state of the florida Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am state of the florida Such of Agent Suprace registered agent. I am state of the florida Such of Agent Suprace registered agent. I am state of the florida Such of Agent Suprace registered agent. I am state of the florida Such of Agent Suprace registered agent. I am state of the florida Suprace registered agent. I am state of the flo | GHEEN | VILLE FL 32331 | | | | | |
| or registered agent, or both, in the State of Florias, Such change was authorized by the corporation's board of directors. Thereby eccept the appointment as registered agent. I am familiar with, and accent the collegations of, Section (ECC 0505, Florida Statetimes). SIGNATURE | | | | 84 City | | FI 85 Zip Code | |
| TITLE | familiär wi | ith, and accept the obligations of, Sec Sky above, typed of performing of registers a jet | otion 607.0505, Florida St BERYLE 3 Cland tille ikapparkens | atutes. AND BOAD INDIE Registered Agent syner. | ire roquirod when renotating) | 4/30/94 | |
| NAME SCARBORO, BERYLE R 12 NAME 13 SINCET ADDRESS CITY-S1-7P GREENVILLE FL 14 CITY-S1-7P TITLE ST DELETE 21 TITLE SCARBORO, BILLIE J. SINCET ADDRESS SINCET ADDRESS SINCET ADDRESS SINCET ADDRESS STREET ADDRESS SCARBORO, BILLIE J. STANDE SINCET ADDRESS SINCET ADDRESS STREET ADDRESS STREET ADDRESS SCARBORO, JANE RENAY STREET ADDRESS SCARBORO, JANE RENAY STREET ADDRESS STREET | | OFFICERS AL | | | ADDITIONS/CHANGES TO OF | | |
| ST | **** | SCARRORO RERVIE R | | | | | |
| CITY-S1-ZPP | | - | | | ss | | |
| NAME SCARBORO, BILLIE J. 22 NAME 23 STREET ADDRESS RT. 3 23 STREET ADDRESS CHY-ST-ZIP GREENVILLE FL 24 CHY-ST-ZIP | | | | 1.4 CITY - \$1 - ZIP | | | |
| STREET ADDRESS RT. 3 23 STREET ADDRESS CREENVILLE FL | TITLE | ST | [] DELET | 2 1 TITLE | | Change Addition | |
| CHY-ST-ZIP GREENVILLE FL | NAME | SCARBORO, BILLIE J. | | 2 2 NAME | | | |
| THILE | STREET ADDRESS | | | 2.3 STREET ADORE: | SS | | |
| SCARBORO, JANE RENAY 3.2 NAME STREEL ADDRESS GREENVILLE FL 3.4 CITY-ST-ZIP GREENVILLE FL 3.4 CITY-ST-ZIP GREENVILLE FL 3.4 CITY-ST-ZIP GREENVILLE FL 3.4 CITY-ST-ZIP GREENVILLE FL 4.1 TITLE Change Addition Addit | | | F"I Bruet | | | CTI Change CTI Addition | |
| STREET ADDRESS RT. 3 3.3 STREET ADDRESS GREENVILLE FL 3.4 CITY-ST-ZIP TITLE | 1 | • | [_] D(tt) | B | | LI Grange LI Augrion | |
| CITY-ST-ZIP GREENVILLE FL | 1 | • | | | se | | |
| TITLE | | 1 | | | | | |
| NAME RACHELLE, BERYLE | <u> </u> | | DELFT | | | Change Addition | |
| STREEL ADDRESS RT. 3 4.9 STREEL ADDRESS 4.4 CTY-SI-ZIP TITLE | NAME | RACHELLE, BERYLE | - | 4.2 NAME | | | |
| CITY-SI-ZIP GREENVILLE FL | STREET ADDRESS | • | | 4.3 STREET ADDRES | ss | | |
| NAME 5 2 NAME STREEL ADDRESS 5 3 STREEL ADDRESS CITY-ST-ZIP 5 4 CITY-ST-ZIP TITLE DELETE 6 1 TITLE Change Addition NAME 6 2 NAME STREEL ADDRESS 6 3 STREEL ADDRESS | CITY-ST-ZIP | | | | | | |
| STREEL ADDRESS 53 STREEL ADDRESS 54 CITY - S1 - ZIP 54 CITY - S1 - ZIP - | | | []] DELFT | | | Change Addition | |
| CITY_ST_ZIP | | | | | | | |
| TITLE | | | | | SS | | |
| NAME \$1REE ADDRESS 63 STHEET ADDRESS 63 STHEET ADDRESS | | | F") DE) E1 | | | Change C Addition | |
| STREET ADDRESS 63 STHEET ADDRESS | | | ב.ן סנוגו | | | Grange Modulon | |
| | | | | | ss | | |
| | | | | | | | |

14. Ido hereby certify that the information supplied with this filing is voluntarily furnished and does not gualify for the exemption stated in Section 119.07(3)(k), 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 logal 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 13 if changed, or on an attachment with an address.

AND TYPED OF FINN ED NAME OF SIGNING OFFICER OF DIRECTOR

4/30/46

1 aru