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

Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90030 023 ***150.00

DOCUMENT # F9600002120

1. Corporation BODNAF	R INVESTMENT GROUP, IN	C.						
Principal Place of Business Mailing Address							EB 11 6	I WILL STREET I WAS
1310 COBB LN		1310 COBB LN						
BIRMINGHAM AL 33213 BIRMINGHAM AL 33213						DO NOT WRITE IN THIS	SPACE	
US		US				3. Date Incorporated or Qualifed		
						04/29/1996		ļ
2. Principal Place of Business 2a. Mailing Address						4. FEI Number	Арр	lied For
21		26				63-1151006	Not	Applicable
Suite, Apt.	#, etc.	Suite, Apt.	#, etc.			5. Certificate of Status Desired	.\$8.75 A	dditional
22		27				5. Certificate of Status Desired	Fee Rec	inited
City & Stat	le	City & Stat	е .			6. Election Campaign Financing	\$5.00 N	
23		28				Trust Fund Contribution	Added to	Fees
Zip	Country	Zip	_	Country	/	8. This corporation owes the current year in		□No I
24	25	29		30		Personal Property Tax. 10. Name and Address of New Registered		
	9. Name and Address of Curre	nt Registered Agen	<u> </u>	81	Name	10. Name and Address of New Registered	Agent	
BOD	NAR, J M			<u> </u>				
503 OSCEOLA DR				82	Street Add	ress (P.O. Box Number is Not Acceptable)		Ì
DESTIN FL 32541			83					
				84	City	FI	85 Zip C	ode .
office or r	to the provisions of Sections 607.050 registered agent, or both, in the State in familiar with, and accept the obligations of the control of	of Florida, Such cha	inde was aut	inorizea ov	the corporati	poration submits this statement for the purpose of ion's board of directors. I hereby accept the appo	f changing its r intment as reg	egistered istered
SIGNATURE	Signature, typed or printed name of registered age	ent and title if applicable.	(NOTE: F	Registered Age	nt signature requir	ed when reinstating) DATE		
12.		ND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS A		
TITLE	PC	L	DELETE	1.1 TITLE			Change	Addition {
NAME	BODNAR, J M			1.2 NAME				\$
STREET ADDRESS	101 FOXHALL RD			1.3 STREE	TADORESS			Ì
CITY-ST-ZIP	BIRMINGHAM AL 35213			1.4 CITY-5	ST-ZIP		Change	Addition
TITLE	V		DELETE	2.1 TITLE			Change	[] Addison
NAME	BODNAR, JOHN M			2.2 NAME				.]
STREET ADDRESS					TADORESS			Í
CITY-ST-ZIP	BIRMINGHAM AL 35213		DELETE	2.4 CITY- 3.1 TITLE	ST-ZIP		☐ Change	Addition
TITLE	S SODNAR KELLY IO		DECETE				□ onenge	
NAME	Bodnar, Kelly Jo 101 Foxhall RD			3.2 NAME				
STREET ADDRESS	BIRMINGHAM AL 35213			-	T ADDRESS			}
CITY-ST-ZIP	T		DELETE	3.4. CITY-	31-ZP		☐ Change	Addition
NAME	BODNAR, ANN G	_		4. 2 NAME			_ •]
STREET ADDRESS	1			B .	T ADDRESS			
CITY-ST-ZIP	BIRMINGHAM AL 35213			4.4 CITY-5				Ì
TITLE	Distriction Par 1002 10		DELETE	5.1 TITLE	/1- AIF		Change	Addition
NAME		_		5.2 NAME			-	}
STREET ADDRESS				5.3 STREE	T ADDRESS	-		
CITY-ST-ZIP				5.4 CITY-5	ST-ZIP			
TITLE	<u> </u>		DELETE	6.1 TITLE			Change	Addition

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 attadment fith an address, with all other like empowered.

6.2 NAME

6,3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

EQUIRED SIGNATURE AND

205) 933-8000