## 2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

## F96000002120 DOCUMENT #

1. Entity Name

BODNAR INVESTMENT GROUP, INC.

## **FILED** Jan 29, 2003 8:00 am Secretary of State

01-29-2003 90155 050 \*\*\*150.00

				900 WE TRO					
Principal Place of Business 200 UNION HILL DR STE 100 BIRMINGHAM AL 35209 US		Mailing Address 200 UNION HILL DR STE 100 BIRMINGHAM AL 35209 US							
2. Principal Pla	ace of Business	3. Mailing Address			1 (80)/80 (1)0 (3)(8 B()) BENT BOXY EBLY EBLY BRIS 1/80 1/80 (10)8 (10) (80)				
Suite, Apt. (		Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES				
City & State	•	City & State			4. FI	63-1151006	)————	pplied For ot Applicable	-
Zip * Country		Zip	Zip Country		5. Certificate of Status Desired S8.75 Ad Fee Require		Iditional	1	
	6. Name and Address of Currer	t Registered Agent	,		7. Name and Address of New Registered Agent				
				Name					
BODNAR, J M				Street Addres	dress (P.O. Box Number is Not Acceptable)				
503 OSCEOLA DR DESTIN FL 32541									1
DESTIN FL	32341			07			1 = . 6.		1
<b>A</b>				City		FL	Zip Cod	ie	
the obligation	ons of registered agent	for the purpose of chang	JOHN	ALMARL B Agent signature requ	o Du An	nt, or both, in the State of Florida. I am fa		and accept	
FI	LE NOW!!! FEE S \$150.00								1
	May 1, 2003 Fee will be \$550.00				- [	9. Election Campaign Financing Trust Fund Contribution.		)O May Be d to Fees	
Make Check	Payable to Florida Department								
10.	OFFICERS ANI		11.		ADD	DITIONS/CHANGES TO OFFICERS AND			ړ ا
NAME STREET ADDRESS	PC Delete BODNAR, J M 101 FOXHALL RD BIRMINGHAM AL 35213			ET ADDRESS ST-ZIP			☐ Change	Addition	10004 (40,000
NAME STREET ADDRESS	V Bodnar, John M 101 Foxhall RD Birmingham Al 35213	□ Delet	NAME STRE				☐ Change	☐ Addition	
NAME STREET ADDRESS	S BODNAR, KELLY JO 101 FOXHALL RD BIRMINGHAM AL 35213	_ Delet	name Stre				☐ Change	☐ Addition	
TITLE NAME	t Bodnar, ann g 101 foxhall rd	☐ Délet	NAME				☐ Change	Addition	

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an appears, with all other like empowered. changed, or on an attachment with an a

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

NAME

NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

**BIRMINGHAM AL 35213** 

☐ Delete

☐ Delete

(245) 871·8865

Change

☐ Change

Addition

Addition