

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # G19581 (9)

1. Corporation Name

B L & L ENTERPRISES, INC.



Principal Place of Business

B.L. & L. ENTERPRISES, INC.  
2455 E. LAKE DRIVE  
DELAND FL 32724  
US

Mailing Address

B.L. & L. ENTERPRISES  
2455 E. LAKE DRIVE  
DELAND FL 32724  
US

3. Date Incorporated or Qualified

01/20/1983

3a. Date of Last Report

05/01/1995

4. FEI Number

59-2539335

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21. 2455 E LAKE DR.  
Suite, Apt. #, etc.

2a. Mailing Address

26. 2455 E LAKE DR.  
Suite, Apt. #, etc.

22. City & State

23. Deland, FL

24. Zip 32724 Country US

27. City & State

28. Deland, FL

29. Zip 32724 Country US

9. Name and Address of Current Registered Agent

GILL, ERIC V., ESQ.  
5848 HENSEL RD.  
PORT ORANGE FL 32019

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

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

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

4/27/96

12. OFFICERS AND DIRECTORS

TITLE PST ☐ DELETE

NAME SMITHERMAN, WILLIAM O. NEW 1996  
STREET ADDRESS 3602 CARDINAL BLVD.  
CITY - ST - ZIP DAYTONA BCH. SHORES FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS

CITY - ST - ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

PST  
SMITHERMAN, WILLIAM O.  
3602 CARDINAL BLVD.  
DAYTONA BCH. SHORES FL 32724

☐ Change

☐ Addition

☐ Change

☐ Addition

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☐ Addition

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☐ Change

☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify 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 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date:

4/27/96

Daytime Phone #

304 738 1060

CR2E034 (12/95)