

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **G26642** (0)
1. Corporation Name
BHJ, INC.



Principal Place of Business

PO BOX 941539
MAITLAND FL 32794-8539

Mailing Address

PO BOX 941539
MAITLAND FL 32794-8539

| | | | | | | | |
|---|---------------------|---------------------|---------------------|--|--|---|--|
| 2. Principal Place of Business | | 2a. Mailing Address | | 3. Date Incorporated or Qualified 03/02/1983 | | 3a. Date of Last Report 01/31/1995 | |
| 21 | Suite, Apt. #, etc. | 26 | Suite, Apt. #, etc. | 4. FEI Number 59-2265954 | | <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable | |
| 22 | City & State | 27 | City & State | 5. Certificate of Status Desired <input type="checkbox"/> | | \$8.75 Additional Fee Required | |
| 23 | Zip | 28 | City & State | 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> | | \$5.00 May Be Added to Fees | |
| 24 | Country | 29 | Zip | 30 | | Country | |
| 9. Name and Address of Current Registered Agent | | | | 10. Name and Address of New Registered Agent | | | |

QUINN, JOHN H.
1079 W MORSE BLVD. STE C
WINTER PARK FL 32789

| | |
|----|--|
| 81 | Name |
| 82 | Street Address (P.O. Box Number is Not Acceptable) |
| 83 | |
| 84 | City |
| 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's signature required when reinstating)

DATE

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|--|---|--|
| TITLE | PD QUINN, JOHN H. 742 FARIROAKS LANE MAITLAND FL | 1.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 1.2 NAME | |
| STREET ADDRESS | | 1.3 STREET ADDRESS | |
| CITY - ST - ZIP | | 1.4 CITY - ST - ZIP | |
| TITLE | STD QUINN, HALLIE H. 742 FARIROAKS LANE MAITLAND FL | 2.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 2.2 NAME | |
| STREET ADDRESS | | 2.3 STREET ADDRESS | |
| CITY - ST - ZIP | | 2.4 CITY - ST - ZIP | |
| TITLE | VD QUINN, JOHN H., JR. 1040 PARK WEST COURT GLENWOOD SPRINGS CO | 3.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 3.2 NAME | |
| STREET ADDRESS | | 3.3 STREET ADDRESS | |
| CITY - ST - ZIP | | 3.4 CITY - ST - ZIP | |
| TITLE | VD QUINN, BROOKS C. 977 CAMBRIDGE DR STARKVILLE MS | 4.1 TITLE | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 4.2 NAME | |
| STREET ADDRESS | | 4.3 STREET ADDRESS | 704 TABBY WALK VILLAS |
| CITY - ST - ZIP | | 4.4 CITY - ST - ZIP | HILTON HEAD ISLAND, SC |
| TITLE | VD STEVENS, HALLIE Q. 2251 NW 21ST AVE. GAINESVILLE FL | 5.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 5.2 NAME | |
| STREET ADDRESS | | 5.3 STREET ADDRESS | |
| CITY - ST - ZIP | | 5.4 CITY - ST - ZIP | |
| TITLE | D STEVENS, THOMAS J., III 2251 NW 21ST AVE. GAINESVILLE FL | 6.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 6.2 NAME | |
| STREET ADDRESS | | 6.3 STREET ADDRESS | |
| CITY - ST - ZIP | | 6.4 CITY - ST - ZIP | |

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:

John H. Quinn, President 01/23/96 (407) 740-0585

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)

4. CORPORATION ANNUAL REPORT 1996 - Supplemental Page

BHJ, INC.
P. O. Box 941539
Maitland, FL 32794-1539

FEI # 59-2265954

ITEM 12. (Continued)

7. D
QUINN, LENNA M.
601 CAMBRIDGE DRIVE
STARKVILLE MS

8.

ITEM 13 (Continued)

X Change

D
QUINN, LENNA M.
704 TABBY WALK VILLAS
HILTON HEAD ISLAND, SC

X Addition

D
REBECCA A. RUDNER
1040 PARK WEST COURT
GLENWOOD SPRINGS, CO