FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G54197

(0)

BUSINESS PROPERTY, INC.

Principal Place	e of Business	Mailing Address					
% ROBERT B. KOEHNEMANN 445 GRACE AVE. PANAMA CITY FL 32401		% ROBERT B. KOEHNEMANN 445 GRACE AVE. PANAMA CITY FL 32401-2721					
					3. Date Incorporated or Qualified 3a. Date of Last Report 08/15/1983 02/07/1996		
	hace of Business	2a. Mailing Address			4. FEI Number		Applied For
Suite, Apt	# 430	26 Suite, Apt. #, etc.	·		59-2301398		Not Applicable
22	T, CIC.	27			5. Certificate of Status Desired		5 Additional Required
City & State		City & State			6. Election Campaign Financing	\$5.0	00 May Be
23		28			Trust Fund Contribution		ed to Fees
Zip 24	Country Zip Country 25 29 30		itry	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No			
:41	9. Name and Address of Curren	it Registered Agent	[30]		10. Name and Address of New Reg	· —	
KOF	EHNEMANN, ROBERT B.			81 Name			
	GRACE AVE.			B2 Street Add	Iress (P.O. Box Number is Not Acceptable		
	IAMA CITY FL 32401		1	51 Silest Add	ress (F.O. Box Norliber is Not Acceptable	e)	
				83			A1971
			-	84 City		Toe 1	Zip Code
						FLII	
11. Pursuant t	to the provisions of Sections 607,050	2 and 607 1508, Florida Stated Florida, Stated Physics	tutes, the ab	ove-named cor	poration submits this statement for the pi tion's board of directors. I hereby accep	rpose of changin	g its registered
agent Fa	m familiar with and accept the obliga	ations of, Section 607.0505,	Florida Statu	tes.	more board or directors. Thereby accep	title appointment	as registered
SIGNATURE	<u>.</u>						
12.	Tophical Species protestinate as acuston cape OFFICERS AND		OTE: Ragislered	Agent signature requ	ired when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE	TODG IN 10
THUE	SD	DELETE	1.1 TITU	ŗ.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECT	
NAME	KOEHNEMANN, LYNN C.	onen	1.2 NA1			C Chair	je 🔲 Addition
STREET ADOPESS	445 GRACE AVE.			EET ADDRESS			
City - St - ZiP	PANAMA CITY FL			1-S1-2IP			
TILE	PD	DELETE	2.1 TH			Chan	ge Addition
NAME:	KOEHNEMANN, ROBERT B		2.2 NAM				,
STREET ADDRESS	445 GRACE AVE.			EET ADDRESS			
CHY-ST-ZIP	PANAMA CITY FL		2 4 GIT	Y-ST-ZIP	\ :		
THILE		DELETE	3 1 TITE			☐ Chan	ge Addition
NAME			3.2 NAM	AE			
STREET ADDRESS			33 STR	EET ADDRESS			
CITY - ST - 70°			3.4. CIT	Y-ST-ZIP			
TilleE		DELETE	4 1 THTL	E T		☐ Chan	ge 🔲 Addition
NAME			4 2 NA	ME			
STREET ADDRESS			4 3 STR	EET ADDRESS			
CITY - S1 - ZIP				(-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	
TileE		☐ DELETE	5 1 TITL			Chan	ge 🗌 Addition
NAME			5.2 NAM		•		
STREET ADDRESS			1	FET ADDRESS			
CITY - ST - ZIP	Land to the control of the control o	T heirte		r-Sr-ZIP		110	100
TILF		☐ DELETE	61 TITL		•	L Chang	ge L Addition
NAME DESCRIPTION			6 2 NAA		·		
STREET ADDRESS			ı	EET ADDRESS			
14. 1 do heret	ov certify that the information, so waster	with this filing done not our	6 4 CiTi	r-S1-ZIP	d in Section 119.07(3)(i), Florida Statutes	I further contif : 4	not the
Informatio	in indicated on this annual report or s	upplemental annual report is	s true and ac	curate and tha	d in Section 19.07(3)(i), Fibrida Statutes t my signature shall have the same legal of as required by Chapter 607, Florida St	effect as if made	under oath: that

SIGNATURE AND TOPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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FILED

Jan 14 1997 8:00am

Secretary of State

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