

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

**PROFIT CORPORATION
ANNUAL REPORT
1995**



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

FILED

95 JUL 31 PM 12:48

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # G64542 (5)

1. Corporation Name

BAMBI SALES AND MANAGEMENT CORPORATION

Principal Place of Business

1154 PINEAPPLE WAY
 % MADELINE T. SINZ
 KISSIMMEE FL 34741

Mailing Address

1154 PINEAPPLE WAY
 % MADELINE T. SINZ
 KISSIMMEE FL 34741

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
 10/04/1983

3a. Date of Last Report
 06/13/1994

4. FEI Number
 59-2424638

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. 1154 Pineapple Way

2a. Mailing Address

26. 1160 Pineapple Way

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22. 70 Edna Phillips

27. 70 Edna Phillips

City & State

City & State

23. Kissimmee FL

28. Kissimmee FL

Zip

Country

Zip

Country

24. 34741

25. Osceola

29. 34741

30. Osceola

9. Name and Address of Current Registered Agent

SINZ, MADELINE T.
 1154 PINEAPPLE WAY
 KISSIMMEE FL 34741

10. Name and Address of Now Registered Agent

81. Name Edna Phillips
 82. Street Address (P.O. Box Number is Not Acceptable)
 1160 Pineapple Way
 83.
 84. City Kissimmee FL 85. Zip Code 34741

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

Edna Phillips - P/S/T

Edna Phillips

June 27, 1995

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PST
NAME	SINZ, MADELINE T.
STREET ADDRESS	1154 PINEAPPLE WAY
CITY - ST - ZIP	KISSIMMEE FL
TITLE	ST
NAME	SINZ, MADELINE T.
STREET ADDRESS	1154 PINEAPPLE WAY
CITY - ST - ZIP	KISSIMMEE FL
TITLE	VP
NAME	EDNA PHILLIPS
STREET ADDRESS	1160 PINEAPPLE WAY
CITY - ST - ZIP	KISSIMMEE FL
TITLE	AST
NAME	PHILLIPS, EDNA
STREET ADDRESS	1160 PINEAPPLE WAY
CITY - ST - ZIP	KISSIMMEE FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	P/S/T	☒ Change ☐ Addition
2. NAME	Phillips, Edna	
3. STREET ADDRESS	1160 Pineapple Way	
4. CITY - ST - ZIP	Kissimmee FL 34741	
21. TITLE		☒ Change ☐ Addition
22. NAME	N/A	
23. STREET ADDRESS		
24. CITY - ST - ZIP		
31. TITLE		☒ Change ☐ Addition
32. NAME	N/A	
33. STREET ADDRESS		
34. CITY - ST - ZIP		
41. TITLE		☒ Change ☐ Addition
42. NAME	N/A	
43. STREET ADDRESS		
44. CITY - ST - ZIP		
51. TITLE		☐ Change ☐ Addition
52. NAME		
53. STREET ADDRESS		
54. CITY - ST - ZIP		
61. TITLE		☐ Change ☐ Addition
62. NAME		
63. STREET ADDRESS		
64. 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Edna Phillips P/S/T Edna Phillips P/S/T June 27, 1995 407-648-7268

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR