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

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
95 MAY -1 PM 2:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # G70145 (9)

1. Corporation Name
BODEN-FAIR INC.

| Principal Place of Business | Mailing Address |
|---|---|
| % PETER M. LENHARDT<br>1465 S. FORT HARRISON AVE., SUITE 201<br>CLEARWATER FL 34616 | % PETER M. LENHARDT<br>1465 S. FORT HARRISON AVE., SUITE 201<br>CLEARWATER FL 34616 |

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 11/15/1983
3a. Date of Last Report: 07/19/1994

2. Principal Place of Business
21 1472 Jordan Hills Court
22 Suite, Apt. #, etc.
23 City & State: Clearwater, Florida
24 Zip: 34616
25 Country: Pinellas

2a. Mailing Address
26 1472 Jordan Hills Court
27 Suite, Apt. #, etc.
28 City & State: Clearwater, Florida
29 Zip: 34616
30 Country: Pinellas

4. FEI Number: 59-2478609 ☐ 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 § 199.032 Florida Statutes ☑ Yes ☐ No

9. Name and Address of Current Registered Agent

LENHARDT, PETER M.
1465 S. FORT HARRISON AVE., SUITE 201
CLEARWATER FL 34616

10. Name and Address of New Registered Agent

81 Name: Lenhardt, Peter M.
82 Street Address (P.O. Box Number is Not Acceptable)
83: 1472 Jordan Hills Court
84 City: Clearwater, FL 85 Zip Code: 34616

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: Peter M Lenhardt 4/27/95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | | |
|---|---|---|---|---|
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | PD<br>LENHARDT, PETER M<br>2420 KENT PL<br>CLEARWATER, FL 00000 | 1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP | PD<br>LENHARDT, PETER M<br>1472 Jordan Hills Court<br>Clearwater, FL 34616 | ☒ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | DS<br>LENHARDT, HELEN K.<br>2420 KENT PLACE<br>CLEARWATER FL | 2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP | SD<br>LENHARDT, HELEN K<br>1472 Jordan Hills Court<br>Clearwater, FL 34616 | ☒ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | 3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | 4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | 5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | 6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP | | ☐ 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)(i), 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: Peter M Lenhardt Peter M Lenhardt 4/27/95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date

0358863 CP