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 # H13131

(8)

Mailing Address

B BAR J RANCH, INC.

Principal Place of Business

FILED
Jan 16 1997 8:00am
Secretary of State

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6751 MURPHY 1MY 69 BARTOW FL 33		6751 MURPHY RD HWY::80 BARTOW FL 33830-9271					
					3. Date Incorporated or Qualified 07/20/1984	3a. Date of Las 04/04/1996	
2. Principal P	lace of Business	2a. Mailing Address	11.	Pd.	4. FEI Number	—— —	Applied For
Suite, Apt	SI Mussly Kd	Suite, Apt. #, etc	ray i	<u> </u>	NOT APPLICABLE	60.7	Not Applicable 5 Additional
22		27			5. Certificate of Status Desired		Required
City & State 23 / A	· Tow Prosida	City & State 28 A 5 Tow	-Fle	rida	Election Campaign Financing Trust Fund Contribution		00 May Be ed to Fees
24 338	9. Name and Address of Current	29 33830	Country 30 / e)	H	8. This corporation has liability for in Florida Statutes	Yes 🗗 No	r s. 199.032,
CDE	ENWOOD CHEVROLET-OLDS, IN		81	Name	10. Name and Address of New Reg	istered Agent	
	N. CHARLESTON STREET	J.					
	MEADE FL 33841		62	Street Addre	ess (P.O. Box Number is Not Acceptable	e)	
			83				
			84	City		Op 7	in Code
				·			lip Code
11. Pursuant office or ragent. La	to the provisions of Sections 607,0502 egistered agent, or both, in the State om m familiar with, and accept the obligat	and 607 1508, Florida Statute of Fiorida. Such change was au tioris of, Section 807 0505, Flor	s, the above uthorized by ida Statutes	e-named corporations.	oration submits this statement for the poon's board of directors. I hereby accep	rpose of changing the appointment	g its registered as registered
SIGNATURE	AUC Srea	rarod 1				7.47	
12,	Sident de transco Diffice d'Indiana d'Engelleura aqui OFFICERS AND		Registereu Age	nt signature require	ed when reinstaling)	DATE	000 111 40
TITLE	P	DELETE	1.1 TITLE	T	ADDITIONS/CHANGES TO OFFICE	Chang	
NAME	GREENWOOD, WAYNE C., JR.		1.2 NAME			LLI Onong	,
STREET ADDRESS	8594 HIDDEN HILL S.E.		1.3 STREET	ADDRESS			
CITY+S1+ZIP	WARREN OH		1.4 CITY - S	T-ZIP			
TITLE	ST	DELETE	2 1 TITLE			Chang	ge Addition
NAME	GREENWOOD, JEAN B.		2.2 NAME				
STREET ADDRESS	8594 HIDDEN HILL S.E.		2.3 STREET	ADDRESS			
CITY - ST - ZIP Trille	WARREN OH	DELETE	2 4 CITY - 5 3 1 TITLE	T- <i>2</i> IP		[] o	. []
NAME			3.2 NAME			☐ Chang	ge Addition
STREET ADDRESS			3.2 NAME	ADORESS			
CITY-S1-ZIP			34 CITY-S				
TITLE		☐ DELETE	4.1 TITLE	- a-ri		☐ Chang	e Addition
NAME			4. 2 NAME			_ •	
STREET ADDRESS			4.3 STREET	ADDRESS			
CITY - ST - ZIP	Control of the Contro		4.4 CITY - S	T - 21P			
TITLE		☐ DELETE	5.1 TITLE			☐ Chang	ge Addition
NAME			5 2 NAME				
STREET ADDRESS			5.3 STREET				
CITY - ST - ZIP TITUE	*** Company (1997)	DELETE	5.4 CITY-S	T - ZIP		П	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
NAME (ר ווינוניוני	6.1 TITLE			☐ Chang	ge [_] Addition
STREET ADDRESS			6.2 NAME	*DODECC			
CITY - ST - ZIP			6.3 STREET				
14 Lda barak			6.4 CITY - S	1-219	***************************************		

4. I do hereby certify that the information supplied with this filing 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 of 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

1-8-97 941-531-281