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Apr 21 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # H17240

(3)

1. Corporation Name

THE BRONZE LADY, INC.

Principal Place of Business

12957 GULF BLVD. EAST
MADEIRA BEACH FL 33708

Mailing Address

12957 GULF BLVD. EAST
MADEIRA BEACH FL 33708-2656

3. Date Incorporated or Qualified
08/20/1984

3a. Date of Last Report
04/01/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

4. FEI Number

59-2439926

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BRAWNER, LYNDL
41850 74TH AVE N
SEMINOLE FL 34842

81 Name

BRAWNER, LYND'L K

82 Street Address (P.O. Box Number is Not Acceptable)

506 LILLIAN DRIVE

83

84 City

MADEIRA BEACH

FL

85 Zip Code

33708

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 signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME BRAWNER, LYND'L K.
STREET ADDRESS 41850 74TH AVE N
CITY-ST-ZIP SEMINOLE FL

☐ DELETE

1.1 TITLE PD
1.2 NAME BRAWNER, LYND'L K
1.3 STREET ADDRESS 506 LILLIAN DRIVE
1.4 CITY-ST-ZIP MADEIRA BEACH, FL 33708

☒ Change

☐ Addition

TITLE VD
NAME DOW, TERRY T
STREET ADDRESS 9936 82ND ST
CITY-ST-ZIP SEMINOLE FL

☒ DELETE

2.1 TITLE VD
2.2 NAME BONE
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change

☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

3.1 TITLE VD
3.2 NAME BENZ, ROBERT
3.3 STREET ADDRESS 8285 127 LANE N
3.4 CITY-ST-ZIP SEMINOLE, FL 33776

☐ Change

☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change

☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change

☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

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 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: X Lynd'L K. BRAWNER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0376791

CR2E034 (9/96)