

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

DOCUMENT # H19176

(7)

95 MAY -1 AM 10:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Corporation Name

B & F FLOAT RENTALS, INC.

2. Principal Place of Business

**% FRED OSTERMAN
3843 S ATLANTIC AVE
DAYTONA BEACH SHORES FL 32127**

2a. Mailing Address

**% FRED OSTERMAN
3843 S ATLANTIC AVE
DAYTONA BEACH SHORES FL 32127**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Created

09/01/1984

3a. Date of Last Report

08/11/1994

4. FET Number

59-2434960

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

2. Principal Place of Business

21

2a. Mailing Address

26

State Apt. #, etc.

22

State Apt. #, etc.

27

City & State

23

City & State

28

Zip

24

Country

25

Zip

29

Country

30

9. Name and Address of Current Registered Agent

**OSTERMAN, FRED
3843 S. ATLANTIC AVE
DAYTONA BEACH SHORES FL 32127**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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 607.0509, Florida Statutes.

SIGNATURE

[Signature] N.A.

12. OFFICERS AND DIRECTORS

NAME

**DP
OSTERMAN, FRED
3843 S. ATLANTIC AVE
DAYT. BEACH SHS FL**

STREET ADDRESS

CITY, STATE, ZIP

NAME

**DV
OSTERMAN, SUSANNA
3843 S. ATLANTIC AVE
DAYT. BEACH SHS FL**

STREET ADDRESS

CITY, STATE, ZIP

NAME

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OSTERMAN, SUSANNA
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CITY, STATE, ZIP

NAME

**DV
OSTERMAN, SUSANNA
3843 S. ATLANTIC AVE
DAYT. BEACH SHS FL**

STREET ADDRESS

CITY, STATE, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 NAME

12 NAME

13 STREET ADDRESS

14 CITY, STATE, ZIP

15 NAME

16 NAME

17 STREET ADDRESS

18 CITY, STATE, ZIP

19 NAME

20 NAME

21 STREET ADDRESS

22 CITY, STATE, ZIP

23 NAME

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25 STREET ADDRESS

26 CITY, STATE, ZIP

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30 CITY, STATE, ZIP

31 NAME

32 NAME

33 STREET ADDRESS

34 CITY, STATE, ZIP

35 NAME

36 NAME

37 STREET ADDRESS

38 CITY, STATE, ZIP

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not comply with the exemption stated in Section 199.032(4), Florida Statutes. I further certify that this information is not used for any other purpose than to supplement and amend reports of this corporation and that my signature shall have the same legal effect as if I had made the report. I am familiar with, and accept the obligations of, Section 607.0509, Florida Statutes. I understand that my name appears in Block 12, or Block 13, if changed, for registration with an address.

SIGNATURE:

Frederick H. Osterman **FREDERICK H. OSTERMAN**

4/26/95 (714) 767-5433