

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
Mar 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
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DOCUMENT # H38649

(0)

1. Corporation Name
BOOTNICK, INC.



Principal Place of Business
525 NORTH HARBOR CITY BLVD.
MELBOURNE FL 32935

Mailing Address
525 NORTH HARBOR CITY BLVD.
MELBOURNE FL 32935-8837

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 01/18/1985	3b. Date of Last Report 02/22/1996
21. State, Apt. #, etc.	26. State, Apt. #, etc.			4. FEI Number 59-2506860	Applied For Not Applicable
22. City & State	27. City & State			5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
23. Zip	28. Zip			6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
24. Country	29. Country			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No	

9. Name and Address of Current Registered Agent

POLAN, JACK
401 OCEAN AVE
MELBOURNE BEACH FL 32951

10. Name and Address of New Registered Agent

81. Name JAMES H. NANCE
82. Street Address (P.O. Box Number is Not Acceptable)
525 N. HARBOR CITY BLVD.
83.
84. City Melbourne FL 85. Zip Code 32935

11. Pursuant to the provisions of Sections 607.0912 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office and 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 has been personally placed on this report and for application.

(NOTE: Registered Agent signature required when reinstating)

DATE

3-18-97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	
NAME	TELEMACHOS, NICHOLAS	1.2 NAME	
STREET ADDRESS	525 NORTH HARBOR CITY BLVD.	1.3 STREET ADDRESS	
CITY, ST, ZIP	MELBOURNE FL 32935	1.4 CITY-ST-ZIP	
TITLE	SD	2.1 TITLE	
NAME	NANCE, JAMES H	2.2 NAME	
STREET ADDRESS	525 NORTH HARBOR CITY BLVD.	2.3 STREET ADDRESS	
CITY, ST, ZIP	MELBOURNE FL 32935	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY, ST, ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY, ST, ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY, ST, ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY, ST, ZIP		6.4 CITY-ST-ZIP	

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 a statement with an address.

SIGNATURE:

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/3/97

DATE

407 284-8416

Display a Check #

0104176

CR2E034 (9/96)