

FILE NOW: FILING FEE AFTER MAY 1 IS ~~\$550.00~~ <sup>165.00</sup>

per Cindy Dunlap 7/17/97

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

FILED

97 JUL 23 AM 9:03

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **H45981 (8)**  
1. Corporation Name  
**BEVERLY M. BRUNELLE, CPA. PROFESSIONAL  
ASSOCIATION**

Principal Place of Business

Mailing Address

**8277 163 PL  
LIVE OAK, FL 32060**

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LIVE OAK, FL.  
32060**

3. Date Incorporated or Qualified **3-7-85** 3a. Date of Last Report **1/24/96**

2. Principal Place of Business 21 Suite, Apt. #, etc. 2a. Mailing Address 26 Suite, Apt. #, etc. 4. FEI Number **59-2502806** Applied For ☐ Not Applicable ☒

22 City & State 27 City & State 5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

23 Zip 24 Country 28 Zip 29 Country 6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

24 Zip 25 Country 29 Zip 30 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

10. Name and Address of New Registered Agent

**BEVERLY M. BRUNELLE  
8277 163 PL  
LIVE OAK, FL 32060**

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 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent's signature required when reappointing) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>PST</b> <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>BEVERLY M BRUNELLE</b>	1.2 NAME	<b>500002251695--4</b>
STREET ADDRESS	<b>8277 163 PL</b>	1.3 STREET ADDRESS	<b>-07/29/97--01135--010</b>
CITY-ST-ZIP	<b>LIVE OAK FL 32060</b>	1.4 CITY-ST-ZIP	<b>****165.00 ****165.00</b>
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>D BEVERLY M. BRUNELLE</b>	2.2 NAME	
STREET ADDRESS	<b>8277 163 PL</b>	2.3 STREET ADDRESS	
CITY-ST-ZIP	<b>LIVE OAK FL 32060</b>	2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 an attachment with an address.

SIGNATURE: **Beverly M Brunelle** 7/21/97 (904) 362 5348

CR2E034 (9/96)