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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

DOCUMENT # H54038

(5)

BRUCE

HOLDEN,	INC.		

Mailing Address

% ROBERT C. SIFRIT 8906 RANCH CREEK DR. AUSTIN TX 78730

21

Principal Place of Business

2. Principal Place of Business

% ROBERT C. SIFRIT 3906 RANCH CREEK DR. AUSTIN TX 78730-3351

2a. Mailing Address

26

Oller B. Ohle.

FILED May 16 1997 8:00am Secretary of State



3a. Date of Last Report

Applied For

Not Applicable

05/01/1996

3. Date Incorporated or Qualified

1/22/01

04/24/1985

59-1649119

4. FEI Number

		Suite, Apt. #, etc.			5. Certificate of Status Desired		3.75 Additional		
22					5. Continuate of Clotes Desired		Fee Re	quired	
	City & State City & State						May Bo		
23	Country	28	T			Trust Fund Contribution			
Zip	Country	Zip	Qount	ry	8. This corporation has liability for intangible tax under s. 199.032,				
24	25 9. Name and Address of Curre	29	30]	Florida Statutes Yes No 10, Name and Address of New Registered Agent					
OIF	HT, ROBERT C.	on tradition right		1 Name	IV, Italia alla Address di Itali	giotolea	- Hour		
				- Hairio					
2315 AARON ST. PORT CHARLOTTE FL				82 Street Address (P.O. Box Number is Not Acceptable)					
run	II CHARLOTTE PL		8	3					
				1					
			8	4 City		FL	85 Zip i	Code	
11 Pursuant	to the provisions of Sections 607.0	502 and 607 1508. Florida Statut	es the abo	ve-named corr	peration submits this statement for the		changing it	s registered	
l officeorr	egistered agent, or both, in the Sta	te of Florida. Such change was a	authorized l	by the corporati	tion's board of directors. I hereby acco	pt the app	ointment as	registered	
	m familiar with, and accept the obli	gations of, Section 607.0505, FR	onda Statut	US.					
SIGNATURE	Signature, typed or printed name of registered a	roest and title if applicable. (NOT	L Figurational A	dent signature requi	freo whon reinstating)	DATE			
12.		ND DIRECTORS	13.	3	ADDITIONS/CHANGES TO OFFI		DIRECTOR	IS IN 12	
TITLE	PTO	☐ DELETE	1.1 1171.6				Change	IS IN 12 Addition	
NAME	HOLDEN, HELEN A.		1.2 NAMI	.					
STREET ADDRESS	3906 RANCH CREEK DR.		13 STRE	ET ADDRESS					
CITY-ST-ZIP	AUSTIN TX		1.4,CiTY	-S1-ZIP					
TITLE	D	DELFTE	21,7171.6				Change	Addition	
NAME	BRUCE, MAY		2.2 NAM						
STREET ADDRESS	4/2 SUCCOTH CT		2.3 STRE	ET ADDRESS					
CITY-ST-ZIP	EDINBURGH, SCOTLAND		2.4 CITY	-ST-ZIP					
TITLE	D	☐ DELETE	3 1 TITLE				Change	Addition	
NAME	WHITESIDE, JOAN D.		3.2 NAM						
STREET ADDRESS	WYMAN HILL		3.3 S1RE	ET ADDRESS					
CITY-ST-ZIP	WOODSTOCK VT		3.4 CITY	· \$1- ZIP					
TITLE		L DELETE	41 11111				Change	Addition	
NAME			4. 2 NAM	ŧ ļ					
STREET ADDRESS			4.3 STRE	FT ADDRESS)	
CITY-ST-ZIP			4.4 DITY	-ST-ZIP					
TITLE		☐ DELETE	51 TATLE				☐ Change	Addition	
NAME			5.2 NAM	<u> </u>					
STREET ADDRESS			5.3 STRE	ET ADDRESS					
CITY-ST-ZIR €	1 (1)	· -	5.4 CITY					· · · · · · · · · · · · · · · · · · ·	
TITLE		DELETE	6.1 JITUE	Į.			Change	Addition	
NAME	1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		6.2 NAMI						
STREET ADDRESS			6.3 \$1RE	ET ADDRESS	•				
CITY-ST-ZIP			6.4 CITY						
Informatio	by certify that the information suppl in indicated on this annual report or fficer or director of the corporation in Block 12 or Block 13 if changed,	r supplemental annual report is t or the receiver or trustee empow	rue and acc rered to exe	cemption stated curate and that ecute this repo	d in Section 119 07(3)(i), Florida Statuli t my signature shall have the same log rt as required by Chapter 607, Florida	os. I furthe al effect as Statulos; a	r certify that s if made uni nd that my r	the der oath; that name	