

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Mar 25, 1999 8:00 am  
Secretary of State

03-25-1999 90017 017 \*\*\*150.00

DOCUMENT # H68726

1. Corporation Name  
BETHEA, INC.

Principal Place of Business  
9070 W OZELLO TR.  
CRYSTAL RIVER FL 34429  
US

Mailing Address  
8009 TIERRA VERDE DR  
TAMPA FL 33617  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/30/1985

4. FEI Number

59-2532509

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 owes the current year Intangible

Personal Property Tax.

☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

9. Name and Address of Current Registered Agent

BETHEA, JAMES A.  
8009 TIERRA VERDE DR  
TAMPA FL 33617

2a. Mailing Address

26 2708 Brock Rd

Suite, Apt. #, etc.

27

City & State

28 Plant City, FL

Zip

29 33565

Country

30 Hillsborough

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

85 Zip Code

James A. Bethea

2181 Watersedge Dr.

Crystal River

FL

34429

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

James A. Bethea

James A. Bethea

President

3-16-99

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD  
NAME BETHEA, JAMES A.  
STREET ADDRESS 2181 WATSEEDGE DR  
CITY-ST-ZIP CRYSTAL RIVER FL

TITLE VD  
NAME BETHEA, JAMES A., III  
STREET ADDRESS 8009 TIERRA VERDE DR  
CITY-ST-ZIP TAMPA FL

TITLE TD  
NAME BETHEA, ANN G.  
STREET ADDRESS 8009 TIERRA VERDE DR  
CITY-ST-ZIP TAMPA FL

TITLE S  
NAME BETHEA, MARTHA A.  
STREET ADDRESS 2181 WATSEEDGE DR.  
CITY-ST-ZIP CRYSTAL RIVER FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

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

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

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

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

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I 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 with all other like empowered.

SIGNATURE:

JAMES A. BETHEA III

Date

Daytime Phone #

CR2E034 (1.1/98)

0381904