

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 10 AM 8:47

DOCUMENT # J03299 (1)

1. Corporation Name
BISHGOFF, INC.

Principal Place of Business

135 WEST BAY STREET
JACKSONVILLE FL 32202

Mailing Address

135 WEST BAY STREET
514
JACKSONVILLE FL 32202
US

DO NOT WRITE IN THIS SPACE.

NEW-ADD:

50 North Laura Street, Suite 3625, Jacksonville, FL 32202

3. Date Incorporated or Qualified	3a. Date of Last Report
03/11/1986	05/01/1994
4. FEI Number	Applied For
59-2689115	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 S. 199.032, Florida Statutes	☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	FL 32202
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23	28
Zip	Country
24	25
29	30

9. Name and Address of Current Registered Agent

BISHOP, BENJAMIN C.
135 WEST BAY STREET
JACKSONVILLE FL 32202

10. Name and Address of New Registered Agent

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
50 North Laura Street
83. Suite 3625
84. City
same
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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	☒ Change ☐ Addition
NAME	BENJAMIN, BISHOP C JR.	1.2 NAME	
STREET ADDRESS	135 W. BAY STREET	1.3 STREET ADDRESS	50 North Laura Street, Suite 3625
CITY - ST - ZIP	JACKSONVILLE FL	1.4 CITY - ST - ZIP	Jacksonville, FL 32202
TITLE	DS	2.1 TITLE	☐ Change ☐ Addition
NAME	BISHOP, STARKE H.	2.2 NAME	
STREET ADDRESS	5003 LONG BOW ROAD	2.3 STREET ADDRESS	
CITY - ST - ZIP	JACKSONVILLE FL	2.4 CITY - ST - ZIP	
TITLE	D	3.1 TITLE	☐ Change ☐ Addition
NAME	BENJAMIN, BISHOP C 111	3.2 NAME	
STREET ADDRESS	102 TEREBRA COURT	3.3 STREET ADDRESS	
CITY - ST - ZIP	PORTE VERDE BEACH FL	3.4 CITY - ST - ZIP	
TITLE	S	4.1 TITLE	☐ Change ☐ Addition
NAME	STARKE H BISHOP	4.2 NAME	
STREET ADDRESS	5003 LONG BOW RD	4.3 STREET ADDRESS	
CITY - ST - ZIP	JACKSONVILLE FL	4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	☐ Change ☐ 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 is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is furnished accurately 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:

Benjamin C. Bishop, Jr., President

3/7/95

(904) 354-5573