

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

CORPORATION ANNUAL REPORT 1995	 FLORIDA DEPARTMENT OF STATE Sandra B. Mayhew Secretary of State Tallahassee, Florida 32399-0400
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**APPROVED
AND
FILED**

95 MAY - 1 PM 5:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # J04335

(2)

BARNETT HOLDING, INC.

Principal Office - Tallahassee 13447 BYRD DR P.O. BOX 934 ODESSA FL 33556 US	Principal Office - Tallahassee 13447 BYRD DRIVE P.O. BOX 934 ODESSA FL 33556 US
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Print or Write in This Space

2. Principal Office - Tallahassee	2a. Mailing Address	3. Date Incorporated or Qualified	3a. Date of Last Report
21. 13447 BYRD DR	26. 13447 BYRD DRIVE	03/17/1986	03/29/1994
22. P.O. BOX 934	27. P.O. BOX 934	4. FFI Number	Applied For
23. ODESSA FL 33556	28. ODESSA FL 33556	59-2652693	Not Applicable
24. US	29. US	5. Certificate of Status Desired	\$8.75 Additional Fee Required
		6. Election Campaign Financing	\$5.00 May Be Added to Fees
		Trust Fund Contribution	
		8. This corporation has liability for intangible tax under S. 199.013, Florida Statutes.	Yes ☐ No ☐

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
RADICS JR, MICHAEL J. 13447 BYRD DR ODESSA FL 33556		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 199.012 and 199.013, 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 agents under Chapter 199, Florida Statutes.

SIGNATURE _____
Registered Agent or Director of the Corporation

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. NAME	PD BYBEE, MARK T. 1967 GUNN HIGHWAY ODESSA FL	1. NAME	☐ Change ☐ Addition
2. NAME	STD RADICS, MICHAEL J. JR. 1967 GUNN HIGHWAY ODESSA FL	2. NAME	☐ Change ☐ Addition
3. NAME	D BARNETT, BERNARD T. ETTINGSHALL ROAD MIDLANDS, ENGLAND	3. NAME	☐ Change ☐ Addition
4. NAME	VD HOULLIS, MICHAEL N. 1967 GUNN HIGHWAY ODESSA FL	4. NAME	☐ Change ☐ Addition
5. NAME	D OLANOW, E. WARREN 1207 PARILLA DE AVILA TAMPA FL	5. NAME	☐ Change ☐ Addition
6. NAME		6. NAME	☐ Change ☐ Addition
7. NAME		7. NAME	☐ Change ☐ Addition
8. NAME		8. NAME	☐ Change ☐ Addition
9. NAME		9. NAME	☐ Change ☐ Addition
10. NAME		10. NAME	☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.012(1)(b), Florida Statutes. I further certify that the information included 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. I am an officer or director of the corporation or the person or persons authorized to execute this report as required by Chapter 199, Florida Statutes, and that my name appears in Block 1, or in Block 13, of this report.

SIGNATURE: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/95 813/920 224