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

APPROVED AND FILED

95 MAY -1 AM 10:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # J11109 (2)

1. Corporate Name
BOOTJACK ENTERPRISES, INC.

Principal Place of Business
3042 TALL PINE DRIVE
SAFETY HARBOR FL 34695

Mailing Address
3042 TALL PINE DRIVE
SAFETY HARBOR FL 34695

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/25/1986
3a. Date of Last Report: 04/28/1994

2. Previous Principal Business
21

2a. Mailing Address
26

State Abbreviation
22

State Abbreviation
27

City & State
23

City & State
28

4. FEI Number: 59-2692116
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

24 25 29 30

8. The corporation has been in business since 5/1/90 in Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

SHEAR, ROBERT L., ESQ.
2605 ENTERPRISE ROAD, EAST
CLEARWATER FL 34619

10. Name and Address of New Registered Agent

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 Section 607.0505(2) of the 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. Check the appropriate registered agent. Line Number 84 or Line 85 must be completed. See Section 607.0505 Florida Statutes.

SIGNATURE

12. OFFICERS AND/OR DIRECTORS

TITLE P	
NAME	WATERS, SHIRLEY
STREET ADDRESS	RR 1 BOX 207A
CITY, STATE, ZIP	LK LINDEN MI
TITLE ST	
NAME	WATERS, BYRON D.
STREET ADDRESS	RR 1 BOX 208A
CITY, STATE, ZIP	LK LINDEN MI

13. ADDITIONAL CHANGES TO OFFICERS AND/OR DIRECTORS

☐ Change ☐ Add

14. I, the undersigned, being the President or Vice President, Treasurer or Assistant Treasurer, for the corporation named in this report, hereby certify that the information contained in the foregoing report is true and correct. Pursuant to Section 607.0505 of the Florida Statutes, I certify that the corporation has complied with the requirements of Section 607.0505 and that the corporation has paid the required fee. Pursuant to Section 607.0505(2) of the Florida Statutes, I certify that the corporation has complied with the requirements of Section 607.0505 and that the corporation has paid the required fee.

SIGNATURE: Byron D. Waters BYRON D. WATERS 4/27/95 (813)486-8627
SIGNATURE AND TYPE OR PRINT NAME OF SIGNING OFFICER OR DIRECTOR

0368567 CP