## FILE NOW: FILING FEE AFTER MAY 14S \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

**FILED** 

Feb 11 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J17469

(4)

**BOUTWELL INDUSTRIAL PARK, INC.** 

r nincipai r iace	5 Of Dusiness	Mailing Address				
430 NORTH G STREET LAKE WORTH FL 33460-2928			430 NORTH G STREET LAKE WORTH FL 33460-2628			
					3. Date Incorporated or Qualified 3a. Date of Last Report 06/04/1986 03/25/1996	
2. Principal Pi	lace of Business	2a. Mailing Addr	ess		4. FEI Number	Applied For
21		26			59-2680909	Not Applicable
Suite, Apt	#, etc	Suite, Apt. #,	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22	MINNOS A . M	27			*	Fee Required
City & State		City & State			Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip TTT	Country	Zip	<u> </u>	Country	8. This corporation has liability for in	
24	25 Name and Address of Cur	29	30	I		Yes No
	9. Name and Address of Cur	rent Hegisterea Agein		81 Name	10. Name and Address of New Reg	Jistered Agent
	IDERWOUDE, JAMES			OI Name		
	NORTH G STREET			82 Street Add	dress (P.O. Box Number is Not Acceptabl	le)
LAKI	E WORTH FL 33460		83			
				•3		
				84 City	11,000	FL 85 Zip Code
office or re	to the provisions of Sections 607.0 egistered agent, or both, in the St m familiar with, and accept the ob	tate of Florida. Such chan	ige was autho	orized by the corpora	rporation submits this statement for the pa ation's board of directors. I hereby accep	urpose of changing its registered the appointment as registered
SIGNATURE .						
12.	Signature hypico or printed name of registered OFFICERS A	AND DIRECTORS		g stered Agent signature requ	ulrad when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE FRS AND DIRECTORS IN 12
TITLE	PVTS			1.1 TITLE	ADDITIONS/CHANGES TO OFFICE	Change Addition
NAME	VANDERWOUDE, JAMES	Name of the Control o		1.2 NAME		First Charles
STREET ADDRESS	6225 PINE DRIVE			1.3 STREET ADDRESS		
CITY - ST - ZIP	LANTANA FL					
TITLE	LANIAN IL	□ DE	ELETE	1.4 GITY+ST-ZIP 2.1 TITLE		Change Addition
NAME	İ			2.2 NAME		the second secon
STREET ADDRESS				2.3 STREET ADDRESS		
CITY-ST-71P				2.4 CITY-67-ZIP		
TITLE		□ DF		3.1 TITLE		Change Addition
NAMÉ	Í			3.2 NAME		
STREET ADDRESS	İ			3 3 STREET ADDRESS		
C(T) - ST - ZIP	İ			3.4 CITY-ST-ZIP	•	
TITLE		DF		4.1 TITLE	<del></del>	Change Addition
NAME				4.2 NAME		
STREET ADDRESS				4.3 STREET ADDRESS		
CITY - ST - ZIP				4.4 CITY-ST-ZIP		
TITLE		□ Di		5.1 TITLE		Change Addition
NAME				5.2 NAME		
STREET ADDRESS				5.3 STREET ADORESS		
CITY - S1 - ZIP				5.4 CITY-ST-ZIP		
TITLE	·	DE		6.1 TITLE		Change Addition
NAMê	1			6.2 NAME		
STREET ADDRESS	1			6.3 STREET ADDRESS		
CITY - ST - ZiP	i			6.4 CITY-ST-ZIP		
14. I do hereb	by certify that the information supp	olied with this filing does	not qualify for	r the exemption state	ed in Section 119.07(3)(i), Florida Statutes	s. I further certify that the
Information I am an of appears ir	n indicated on trils annual report t ificer or director of the corpor <del>ati</del> on in Block 12 or Block 13 if changed	or supplemental annual re n or the receiver or truster d, or on an attachment wi	∍port is true a e enipowerec trian addres:	and accurate and that d to execute this repose.	at my signature shall have the same legal ort as required by Chapter 607, Florida Si	l effect as if made under oath; that latutes; and that my name