

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  
Apr 23, 1999 8:00 am  
Secretary of State

04-23-1999 90217 010 \*\*\*150.00

DOCUMENT # J31689

1. Corporation Name  
BUDY ENTERPRISES, INC.

Principal Place of Business  
2000 PALM BAY RD  
56  
PALM BAY FL 32905  
US

Mailing Address  
783 LOUTNIK RD SE  
1615 GEORGIA STREET, N.E.  
PALM BAY FL 32909  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
09/04/1986

4. FEI Number  
59-2719300

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

2a. Mailing Address

26 660 SEAPORT TER. SE

27 Suite, Apt. #, etc.

28 PALM BAY, FL

29 32909 30 U.S.A.

9. Name and Address of Current Registered Agent

BINDA, KENNETH J  
1639 GEORGIA STREET NE  
PALM BAY FL 32907

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 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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DST  
NAME WILKS, G. WILLIAM  
STREET ADDRESS 783 KOUTNIK ROAD SE  
CITY-ST-ZIP PALM BAY FL

TITLE PD  
NAME WILKS, JUDITH  
STREET ADDRESS 783 KOUTNIK ROAD SE  
CITY-ST-ZIP PALM BAY FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 DST  
1.2 NAME WILKS, G. WILLIAM  
1.3 STREET ADDRESS 660 SEAPORT TER. SE  
1.4 CITY-ST-ZIP PALM BAY, FL 32909

2.1 TITLE PD  
2.2 NAME WILKS, JUDITH  
2.3 STREET ADDRESS 660 SEAPORT TER. SE  
2.4 CITY-ST-ZIP PALM BAY, FL 32909

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: Judith Wilks JUDITH WILKS  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/20/99  
Date

407-723-0021  
Daytime Phone #

CR2E034 (11/98)