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**Jan 23 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # J33870 (3)

1. Corporation Name
B & F STUCCO, INC.



Principal Place of Business: **% MICHAEL FEESER 9640 EAST SILVER OAKS TRAIL INVERNESS FL 32650-1932**

Mailing Address: **% MICHAEL FEESER 9640 EAST SILVER OAKS TRAIL INVERNESS FL 34450-1932**

3. Date Incorporated or Qualified: **09/18/1986**

3a. Date of Last Report: **02/07/1996**

4. FEI Number: **59-2733983**

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: 21, 22, 23, 24

2a. Mailing Address: 26, 27, 28, 29, 30

9. Name and Address of Current Registered Agent: **FEESER, MICHAEL 9640 EAST SILVER OAKS TRAIL INVERNESS FL 34450**

10. Name and Address of New Registered Agent: 81, 82, 83, 84, 85

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: *Michael Feeser* **Michael Feeser President** DATE: **1/14/97**

12. OFFICERS AND DIRECTORS

TITLE: **PD** DELETE

NAME: **FEESER, MICHAEL**

STREET ADDRESS: **9640 E. SILVER OAKS TR**

CITY-ST-ZIP: **INVERNESS FL**

TITLE: **D** DELETE

NAME: **BURLEW, ROBERT W. JR**

STREET ADDRESS: **P.O. BOX 630**

CITY-ST-ZIP: **HERNANDO FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE: Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE: Change Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE: Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE: Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE: Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE: Change Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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 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; 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 in change or on an attachment with an address.

SIGNATURE: *Michael Feeser* **Michael Feeser President** DATE: **1/14/97 (353)344-1748**

CR2E034 (9/96)