## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

BOHAYCHYK & SONS, INC.



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K12919

(2)

FILED Jan 28 1997 8:00am Secretary of State



Principal Place of Business Mailing Address						i festállit Sat (12,3 11916 téts) siste iski áréli alak sisti élek sisti élek áreli alak rási				
108 SHARWOOD DR 108 SHARWOOD NAPLES FL 33942-2720 NAPLES FL 3411										
						3. Date Incorporated or Qualified 01/25/1988		e of Last R 1/1996	eport	
	lace of Business	2a. Mailing Address 26			4. FEI Number 65-0028168	Applied For Not Applicable				
Suite, Apt	#. etc.	Suite, Apt. #, etc.			\$9.75 Additional					
22		27			5. Certificate of Status Desired Fee Required					
City & State	e	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees					
23	Country				Trust Fund Contribution					
Zip	h	Country 7ip Co		y		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes				
24	9. Name and Address of Currer		30]	_		10, Name and Address of New Reg				
MUR	RAY, PAULA P		8	1	Name					
	SILVERADO DR.		-	1	Oles et Beleix	(DO D. Harber in New Assessed	1-1			
	LES FL 33999			2	Street Addre	ess (P.O. Box Number is Not Acceptab	ie)			
			L	3				<b>-</b>		
					84 City FL 85 Zi					
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable (NOTE	Registered A			oration submits this statement for the pon's board of directors. I hereby accepted when reinstating)	DATE			
12.	OFFICERS AND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFIC				
THILE	DOMANORAN CRYDIES III	☐ DELETE	4	1.1 TITLE				Change	L Addition	
NAME.	BOHAYCHYK, CHARLES III  108 SHARWOOD DRIVE		1.2 NAM							
STREET ADDRESS	NAPLES FL		1	1.3 STREET ADDRESS						
C-TY - ST - ZIP			_	1.4 CITY - ST - ZIP 2.1 TITLE				Change	Addition	
TIFLE			1	2.1 TITLE 2.2 NAME				criange		
NAME STREET ADDRESS				2.3 STREET ADDRESS						
CITY - ST - ZIP			2.4 CITY-ST-ZIP			:			· ·	
III_F		DELETE	3 1 TITLE		-211			Change	Addition	
NAME				3 2 NAME 3 3 STREET ADDRESS			·			
STREET ADDRESS										
CHTY+ST+ZIP			3.4. CITY - ST - ZIP							
TITLE	DELETE			4.1 TITLE				Change	Addition	
NAMÈ			4. 2 NAV	Æ						
STREET ADDRESS			4.3 STRE	ET /	ADDRESS					
C(1) y - S1 - 2(P			4.4 CITY	- ST	- ZIP					
TITLE			5.1 TITLE	5.1 TITLE				Change	Addition	
NAME			5.2 NAM	ΙE					}	
STREET ADDRESS			5 3 STRE	ET A	ADDRESS					
0:17 - \$1 - 74P			5.4 CITY	-51	-ZIP					
TITLE		☐ DELETE	6.1 TITLE	E				Change	Addition	
NAME			6.2 NAM	E						
STREET ADDRESS			6.3 STRE	ET A	ADDRESS					
CITY - ST - ZIP			6.4 CITY	-\$1	- 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 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.

SIGNATURE

Charles Bo house by k

CHARLES

S BOHAYC YYH

1-19-97 941-598-1630

te Phone #