

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

DOCUMENT # K15692

(2)

1. Corporation Name

B.J. GATORS, INC.

Principal Place of Business

Mailing Address

**% JOSEPH MENDOLIA
4054 SHOAL LINE BLVD
SPRING HILL FL 34607**

**% JOSEPH MENDOLIA
4054 SHOAL LINE BLVD
SPRING HILL FL 34607**

**APPROVED
AND
FILED**

95 APR 28 PM 4:22

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 02/22/1988		3a. Date of Last Report 07/12/1994	
4. FEI Number 59-2942953		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 has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No			

2. Principal Place of Business		2a. Mailing Address	
21		26	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
22		27	
City & State		City & State	
23		28	
Zip	Country	Zip	Country
24	25	29	30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**HOOK, PATRICE C.
5358 SPRING HILL DRIVE
SPRING HILL FL 34606**

81 Name
82 Street Address (P)
83
84 City

**William T Charnock III
CHARNOCK & HAGER
ATTORNEYS AT LAW
13135-D SPRING HILL DRIVE
SPRING HILL, FLORIDA 34609**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors, familiar with, and subject to the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(Signature of officer or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PSD	1.1 TITLE	☐ Change ☐ Addition
NAME	MENDOLIA, JOSEPH	1.2 NAME	
STREET ADDRESS	4448 BAHAMA DRIVE	1.3 STREET ADDRESS	
CITY - ST - ZIP	SPRING HILL FL	1.4 CITY - ST - ZIP	
TITLE	VTD	2.1 TITLE	☐ Change ☐ Addition
NAME	MANCUSO, ROBERT	2.2 NAME	
STREET ADDRESS	4508 GULFSTREAM DRIVE	2.3 STREET ADDRESS	
CITY - ST - ZIP	SPRING HILL FL	2.4 CITY - ST - ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information furnished with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Signature Number