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

PROFIT CORPORATION ANNUAL REPORT 1998 DOCUMENT #
1. Corporation Name



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

(8)

BELL AND JOHNSON, INC.

FILED Apr 20 1998 8:00am Secretary of State

| Principal Place | e of Business | Mailing Address | | T TODINGIL DOT LIBIT GLOUD LIBIT 1880 DEDIT 648EL 61811 GIBIT GLOT |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|--------------------------------------|------------------------------|------------------------------------------------------------------------------------------|
| 4848 8TH AVE E 4848 8TH AVE E | | | | |
| BRADENTON FL 34208 BRADENTON FL 34208 | | | DO NOT WRITE IN THIS SPACE | |
| | | | | 3. Date Incorporated or Qualified |
| | | | | 09/06/1989 |
| 2. Principal P | lace of Business | 2a. Mailing Address | 1 C: ~ | 4 FEI Number |
| 21 701 | 1 237 13 St. F. | 26 7011 237 t | 3 St. E | . 65-0144307 Not Applicable |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | | 5. Certificate of Status Desired \$8.75 Additional |
| 22 | | 27 | | Fee Required |
| | ikka City, FL | City & State C | ון ניציי. | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees |
| Zip | Country | 2ip /25/ 3n | Country | 8. This corporation owes or has paid the current year Intangible |
| 24 342 | | 100 | USA | Personal Property Tax due June 30. XYes No 10. Name and Address of New Registered Agent |
| | | | | |
| BELL, IHUMAS W. | | | | |
| 1800 SECOND ST. SARA SO TA FL 34230 | | | 82 Street | Address (P.O. Box Number is Not Acceptable) |
| SAI | NASOTA PL 34230 | | 83 | |
| | | | 0.00 | |
| | | | 84 City | FL 85 Zip Code |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, 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 lamiliar 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 reli | | | | · · · · · · · · · · · · · · · · · · · |
| 12. | OFFICERS AND | DIRECTORS | 13. | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PD Change Addition |
| TITLE | PD | ביין אנונונ | 1.1 TITLE | Acharon John Fleet Change Ll Addition |
| NAME | JOHNSON, JOHN FLEET | | 1.3 STREET ADDRESS | 7011 2371 St. E. |
| STREET ADDRESS | 4848 8TH AVE E Bradenton Fl | | 1.4 City-St-ZiP | Myaleka City, FL 34251 |
| CITY-ST-ZIP TITLE | STD | DELETE | 2.1 TITLE | CfB / X Change Addition |
| NAME | JOHNSON, MITZI BELL | _ | 22 NAME | Johnson, Mitzi Bell |
| STREET ADDRESS | 4848 8TH AVE E | | 2.3 STREET ADDRESS | 7011 231 th St. E |
| CITY-ST-ZIP | BRADENTON FL | | 2. 4 CITY-ST-ZIP | Myakka City FL 34251 |
| TITLE | | ☐ DELE TE | 3.1 TITLE | Change Addition |
| NAME | | | 3.2 NAME | |
| STREET ADDRESS | | | 3.3 STREET ADDRESS | |
| CITY-ST-ZIP | | | 3.4. CITY-ST-ZIP | |
| TITLE | | ☐ DELE te | 4.1 TITLE | LJ Change LJ Addition |
| NAME | | | 4. 2 NAME | |
| STREET ADDRESS | | | 4.3 STREET ADDRESS | |
| CHTY-ST-ZIP | | DELETE | 4.4 CITY-ST-ZIP 5.1 TITLE | Change Addition |
| TITLE NAME | | - DETERIT | 5.2 NAME | Change CJ Addition |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | |
| CITY-ST-ZIP | | | 5.4 CITY-ST-ZIP | |
| TITLE | | DELETE | 6.1 TITLE | Change Addition |
| NAME | Ţ | | 6.2 NAME | |
| STREET ADDRESS | | | 6.3 STREET ADORESS | |
| CITY-ST-ZIP | • | | 6.4 CITY-ST-ZIP | |
| 14. I hereby o | ertify that the information supplied with | this filing does not qualify for the | | ed 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.