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May 01 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # M67938 (4)
1. Corporation Name
BRADFORD BUILDING CORPORATION



Principal Place of Business
323 COURTLEA OAKS BLVD
PO BOX 771547
WINTER GARDEN FL 34777-8547
US

Mailing Address
~~420 S. WINTER GARDEN VINELAND RD~~
PO BOX 771547
WINTER GARDEN FL 34777-8547

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
02/11/1988

4. FEI Number
59-2883624
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 or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 P.O. Box 771547
Suite, Apt. #, etc.

27 323 COURTLEA OAKS BLVD
City & State

28 WINTER GARDEN FL
Zip Country

29 34777 30 US

9. Name and Address of Current Registered Agent

BRADFORD, M. WADE
323 COURTLEA OAKS BLVD
PO BOX 771547
WINTER GARDEN FL 34777

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 D
NAME BRADFORD, M. WADE
STREET ADDRESS 111 MERICAM CT.
CITY-ST-ZIP WINTER GARDEN FL

TITLE D
NAME BRADFORD, JANICE M.
STREET ADDRESS 111 MERICAM CT.
CITY-ST-ZIP WINTER GARDEN FL

TITLE VP
NAME BRADFORD, CAMERON W
STREET ADDRESS 111 MERICAM CT
CITY-ST-ZIP WINTER GARDEN FL

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
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

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.

SIGNATURE: [Signature] PRES. M. WADE BRADFORD N12268 407-651-6397

CR2E034 (10/97)