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PROFIT CORPORATION ANNUAL REPORT

1997

B.H.R. OF TAMPA, INC.



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # M87986

(9)

FILED Feb 13 1997 8:00am Secretary of State

Principal Place		Mailing Address							
3708 SWANN AVE. TAMPA FL 33609		3708 SWANN AVE. TAMPA FL 33609-4522							
US		US			3. Date Incorporated or Qualific 06/28/1988	ed 3a, Dat 01/2	te of Last R 6/1996	leport	
2. Principal Pl	ace of Business	2a. Mailing Address 26		· · · · · · · · · · · · · · · · · · ·	4. FEI Number 59-2896732	···········		oplied For of Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		·····	5. Certificate of Status Desired	X	\$8.75	Additional equired	
City & State		City & State	City & State		Election Campaign Financing Trust Fund Contribution	9 🗀	\$5.00 May Be Added to Fees		
Zip 24	Country 25	Zip	Cou 30	ntry	8. This corporation has liability Florida Statutes	for intangible t	lax under s		
	9. Name and Address of Currer				10. Name and Address of New				
	SENT, EARL F.			B1 Name	Godfrey, Mary Lou				
	SWANN AVENUE Pa fl 33609		1		dress (P.O. Box Number is Not Acce	ptable)	•	***************************************	
, IVIAII	TATE 33003		}	83					
,-					Swann Ave ampa		85 Zip	Code	
		1007 1500 5			•	FL	336	609	
11. Pursuant to	to the provisions of Sections 607.050 egistered agent, or both, in the State	12 and 607.1508, Florida Statute of Florida. Such change was a	uthorized	ove-named co by the corpor	rporation submits this statement for tration's board of directors. I hereby ac	ne purpose of scept the appr	cnanging it as tnemtrik	is registered registered	
agent. I ar SIGNATURE	m tamiliar with, and accept the oblig	ations of, Section 607.0505, Flo	rioa Stati Ovr. 1	Lora 6	odfrey Presiden	t 213	3197		
<u> </u>	Signature hypodior printed name of registered ago			Agent signature req	ulred when reinstating)	DĀT€	7		
12.	VPT OFFICERS AN	ID DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO O		DIRECTOR Change	RS IN 12 Addition	
TITLE	BESSENT, EARL F	XIX DETER	1.1 TII 1.2 NA				L.J Crange	Assumen	
STREET ADDRESS	3708 SWANN AVENUE			REET ADDRESS					
CITY+ST-7IP	TAMPA FL		1.4 CF	Y-ST-ZIP					
TITLE	V	☐ DELETE	21 T/I	LE			Change	Addition	
NAME	MAYER, MARCEL G		2.2 N	ME					
STREET ADDRESS	3708 SWANN AVE TAMPA FL			reet address					
CITY-ST-ZIP TITLE	PS PS	DELETE	2. 4 CI 3.1 T(1	TY - ST - ZIP			Change	Addition	
NAME	GODFREY, MARY LOU	FT bitter	3.1 III	1	P/T/S	-	Per Preside	Land received	
STREET AODRESS	3708 SWANN AVE			REET ADDRESS	Godfrey, Mary	Lou			
CITY-ST-7/P	TAMPA FL		· ·	TY-ST-ZIP	3708 Swann Ave				
TITLE		☐ DELETE	4.1 10		Tampa, FL		☐ Change	Addition	
NAME			4. 2 N	NME	•				
STREET ADDRESS		•	4.3 ST	REET ADDRESS					
CITY-ST-ZIP			4.4 Cf	ry-st-zip					
TITLE		☐ DELETE	5.1 10	1			Change	Addition	
NAME			5.2 NA	i					
STREET ADDRESS				REET ADDRESS					
CITY-ST-ZIP		DELETE	*****	Y-ST-ZIP			Change	Addition	
TITLE		€] nertie	6.1 111				TT AMBING	T Vonding	
NAME STREET ADDIGGS			6.2 NA	ME REET ADDRESS					
STREET ADDRESS CITY-ST-ZIP				IY-ST-ZIP					
OH 1.91.5tt			0.4 ()	1 31 611					

14. I do hereby certify that the information supplied with this filing does not quality 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:

1/17/97

(813) 879-3271