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NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # N42088

1. Corporation Name

BACDMOOR BOULEVARD BEAUTIFICATION COUNCIL, INC.

FILED Jun 19 1997 8:00am Secretary of State

| Principal Place of Business | | | | |
|--|---|-------------------------------|---|----------------------------------|
| 2101 CORDOVA GREE LARGO, FL 3377; | | | | |
| LARGO, FC 3377 | , | | 3. Date Incorporated or Qualified | 3a. Date of Last Report 4/96 |
| 2. Principal Place of Business | 2a. Mailing Address | - | 4. FEI Number | Applied For |
| 21 SAME | 26 SAME | ; | 37-700/01/ | Not Applicable |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required |
| City & State | City & State | | 6. Election Campaign Financing | |
| 23 | 28 | | Trust Fund Contribution | \$5.00 May Be Added to Fees |
| Zip Country | Zip | Country | 8. This corporation has liability for | intangible tax under s. 199.032, |
| 24 25 | | 30 | | Yes X No |
| 9. Name and Address of Curre | nt Registered Agent | 81 Name | 10. Name and Address of New Re | glatered Agent |
| | | 81 Name | CECIL K. CARRIE | EC. JR V |
| | | 82 Street A | ddress (P.O. Box Number is Not Acceptab | ole) Tour |
| * | | B3 | 8245 BRENTWOOD | KOAD |
| . * | | | | |
| | | B4 City L | .AL 60 | FL 85 Zip Code |
| A4 D | | | | |
| office or registered agent, or both, in the State of Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. | | | | |
| SIGNATURE Signature typed or priviled name cylogistered agent and it of # applicable (NOTE Registered Agent signature required when reinstating) | | | | |
| | ND DIRECTORS | 13. | ADDITIONS/CHANGES TO OFFIC | CERS AND DIRECTORS IN 12 |
| THIE PRESIDEAT | ↑ DELETE | 1.1 TITLE | | Change Addition |
| NAME JOHN BIRKON STAFET ADDRESS 8444 BRENTWOOD | ע מינו | 1.2 NAME | | |
| STREET ADDRESS 8444 BRENTWOOD | \U \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | 1.3 STREET ADDRESS | | l l |
| <u> </u> | 777 | 1.4 CHY-ST-ZIP | | |
| NAME PAUL WOODBU | \mathcal{T}_{\bullet} , \mathfrak{D} DELETE | 2.1 TITLF | | ☐ Change ☐ Addition |
| $1 \qquad 1 \qquad 1 \qquad 0 \qquad $ | CRECKIC | 2.2 NAME | | |
| | 3KEC 1V3 | 2.3 STREET ADDRESS | | |
| TITLE SECRETARY | DELETE | 2. 4 CITY-ST-ZIP 3.1 TITLE | | Change Addition |
| MALE PARTY MALERIA | ν – | 3.2 NAME | | E Manual |
| STREET ADDRESS 8765 BALDMOOR | BLUD APT 203 | 3.3 STREET ADDRESS | | |
| CITY-ST-ZIP LARGO, FL 3 | 3017 | 3 4. CITY - ST - ZIP | | |
| TITLE | ■ DELETE | 4.1 TITLE | TREASURER D | Change Addition |
| NAME | | 4. 2 NAME | CECIL K CARRIER J | re. |
| STREET ADDRESS | | 4.3 STREET ADDRESS | 8245 BRENTWOOD | KD |
| CITY-ST-ZIP | | 4.4 CITY - ST - ZIP | LARGO, FL 3377 | 7 |
| TITLE | DELETE | 5.1 TITLE | | Change Addition |
| NAME | | 5.2 NAME | 80000221 -06/20/37010 | 13111113 |
| STREET ADDRESS | | 5.3 STREET ADDRESS | ***81.25 | 172-000 |
| CITY-ST-ZIP | DELETE | 5.4 CITY- ST-ZIP 6.1 TITLE | ###Q1.CO | Change Addition |
| NAME | [] OLLLIE | 6.2 NAME | | DE COMMON |
| STREET ADDRESS | | 6.3 STREET ADDRESS | | T |
| CITY-S1-ZIP | | 64 CITY-ST-ZIP | | 67 |
| 14. I do hereby certify that the information supplied | ed with this filing does not qualify | for the exemption sta | ated in Section 119.07(3)(i). Florida Statute | s. 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address. | | | | |