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NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

BONK, INC.

Principal Place of Business

Mailing Address

SAME

WI COMPLETE AVE

Suite, Apt. #, etc. 2 20 30 5. Certificate of Status Desired 5. Certificate of Status Desired 5. S. 75 Additional From Front Page 1. State 5. Certificate of Status Desired 5. Certificate 5. Certificate of Status Desired 5. Certificate 5. Certifi	типтри	r, PC 3360	77			3. Date Incorporated or Qualified 3a. Date of Last Report
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COREY JANE HOLT 215 1/2 W. COMANCHE AVE. TAMPA, FL 33 604 11. Pursuant to the provisions of Sections 617 0502 and 617 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I heroby accept the appointment as registere agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I heroby accept the appointment as registere agent. I am familiar with, and accept the objection of 7.6503, Florida Statutes. SIGNATURE SIGNATURE Signature. hypodor private name of republered agent and store appointment as registere. (NOTE Repatitored Agont signature required when removating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITION/SICHANGES TO OFFICERS AND DIRECTORS IN 12. TRUE 12. Intel 12. ADDITION/SICHANGES TO OFFICERS AND DIRECTORS IN 12. 13. STREET ADDRESS 7. STREET ADDRE	24	25	29	30		l
COREY JANE HOLT 215 1/2 W. COMANCHE AVE. TAMPA, FL 33 604 32 Street Address (P.O. Box Number is Not Acceptable) 33 Housant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register of agent. I am familiar with, and accept the obligations of. Section 617.0503, Florida Statutes. SIGNATURE Signature, typed or private name of registered agent and stock approximate and stock appointment as registere agent. I am familiar with, and accept the obligations of. Section 617.0503, Florida Statutes. SIGNATURE Signature, typed or private name of registered agent and stock appointment as registere agent. I am familiar with, and accept the obligations of. Section 617.0503, Florida Statutes. SIGNATURE Signature, typed or private name of registered agent and stock appointment as registere agent with relativishing. DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. Tampe 12. Tampe 13. SIREET ADDRESS 14. CITY-SI-2P DELETE 11. TITLE 12. Tampe 13. SIREET ADDRESS 14. CITY-SI-2P DELETE 14. CITY-SI-2P DELETE 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 16. CITY-SI-2P PAUL RELLER D. Change Additional Constantion of Change Additional Constantion of Con		9. Name and Address of Cur	rent Registered Agent			10. Name and Address of New Registered Agent
TAMPA, FL 33604 Street Address (P.O. Box Number is Not Acceptable)	CAREV	Take Har	-	81	Name	
TAMPA, FL 33604 11. Pursuent to the provisions of Sections 617 0502 and 617 1508. Florids Statutes, the above-named corporation submits this statement for the purpose of changing its register office or registered agent, or both, in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registere agent. I em familiar with, and accept the obligations of. Section 617 0503. Florids Statutes. SIGNATURE Strandure, typed or pursued name of registered agent and site of applicable (NOTE Registered Agent signature required when relineating) DATE	COKE			92	Stead Addre	cos (B.O. Bay Number in Not Accomptable)
TAMPA, FL 33 604 11. Pursuant to the provisions of Sections 617 0502 and 617 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register office or registered agont, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registere agont, and accept the obligations of. Section 617 0503, Florida Statutes. SIGNATURE Signature, lipodd of printed name of registered agont and titled applicable.	215	2 W. Coma	NCHE AVE	02	Siree(Addie	ess (r.o. box number is not Acceptable)
11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registere agent. I am familiar with, and accept the obligations of, Section 617,0503, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO DEFICERS AND DIRECTORS IN 12. 11. TITLE 11. TITLE 12. PAPES TOENT 13. ADDITIONS/CHANGES TO DEFICERS AND DIRECTORS IN 12. 11. TITLE 13. TREET ADDRESS 14. CITY-ST-ZIP 14. TITLE 15. TAMPE 16. TAMPE 17. TAMPE 18. TAMPE 18. TAMPE 18. TAMPE 19. Change 19. Change 19. Additional applicable. 19. ADDITIONS/CHANGES TO DEFICERS AND DIRECTORS IN 12. 19. ADDITIONS/CHANGES TO DEFICE TO THE TEXT	~~			83	<u> </u>	
11. Pursuant to the provisions of Sections 517,0502 and 617, 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register agent. I am familiar with, and accept the obligations of. Section 617,0503, Florida Statutes. Signature. Typod or printed name of registered agent and title of applicable. (NOTE Registered Agent signature required when relievating). DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE NAME 12. STREET ADDRESS CITY-SI-ZIP DELETE DELETE DELETE 11/11LE DELETE 21 TITLE V/D 22 NAME 23 SIREET ADDRESS CITY-SI-ZIP DELETE DELETE 31 SIREET ADDRESS SIREET ADDRESS CITY-SI-ZIP DELETE DELETE AGAI ATTION AVE. COREY HOLT Change Addi NAME STREET ADDRESS CITY-SI-ZIP DELETE ATTION AVE. 13 SIREET ADDRESS ACCOREY HOLT Change Addi NAME STREET ADDRESS CITY-SI-ZIP DELETE ATTION AVE. COREY HOLT Change Addi NAME ATTION AVE. COREY HOLT Change Addi NAME STREET ADDRESS CITY-SI-ZIP DELETE ATTION AVE. COREY HOLT Change Addi NAME STREET ADDRESS CITY-SI-ZIP DELETE ATTION AVE. COREY HOLT Change Addi NAME STREET ADDRESS CITY-SI-ZIP DELETE ATTION AVE. COREY HOLT Change Addi NAME STREET ADDRESS CITY-SI-ZIP DELETE ATTION AVE. COREY HOLT Change Addi NAME STREET ADDRESS CITY-SI-ZIP ACCORE AND CREATER ADDRESS ADDITIONS CHANGES TO DEFICERS AND DIRECTORS IN TERMINING TO TRANSPORT ADDRESS ADDITIONS CHANGES TO THE ADDRESS TO DEFICERS AND DIRECTORS IN TERMINING TO THE ADDRESS	TAMM	a. FL 35	604			
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District the A	STREET ADDRESS					SOU SOUNT #A

14. I do 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 617. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

5.4 CITY - ST - ZIP

6.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

STREET ADDRESS

CITY-ST-ZIP

NAME

DELETE

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FILED

Jun 17 1997 8:00am

Secretary of State