## NOT-FOR-PROFIT CORPORATION



DOCUMEN I # N96000004944  1. Entity Name  B.F. INDUSTRIAL CENTER OWNERS' ASSOCIATION, INC.					06 FEB 13 PM 2: 10  SECRETARY OF STATE			
9792 WINDI	ce of Business SCH RD ER, OH 45069	Mailing Address 9792 WINDISCH RD WESTCHESTER, OH 450	69	TALL	AHASSEE, FLOR	ND,	· ,	
	Place of Business		OT SE IGHT	UKU.			_	
<b>484</b> 1 Suite, Apt.	# atc	Suite, Apt, #, etc.	Dr.dedby	TO LABOR.		A 82498 /	161	
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City & Sta		City & State CAPE	CORAL, FL	4. FEI Number 31-148007	72		priod For	
<b>FORT</b> Zip	MERS, FL Country	Zip 33904	Country	31-140007	12		t Applicable	
<b>-</b> 339		BISIARIM	USA	5. Certificate of S	itatus Desired	\$8.75 Add Fee Require		
	6. Name and Address of Current Re			7. Name and Add	dress of New Registere	d Agent		
KANTER, 701 LAKE MIAMI, FL	VIEW DR		Name Street Ad	dress (P.O. Box Number is	Not Acceptable)			
			City	Paragraman (	CARL CORAL F	Zip Code	33904 WA	
	e named entity submits this statement for ti tions of registered agent.	no parposo or onenging no re	Santorde dilloc or	ogistaroa agont, or both, in	Tino diata di Fiorida. Fa	arrigational verget,	and accopt	
SIGNATURE	A MA	ANO ANO Ititis if applicable. (NOTE:		ンドアル 「いし ure required when reinstating)	12 C DATE	<b>S</b>		
F	AMT	titie d'applicable. (NOTE: l'In accordance	Registered Agent signat	ure required when reinstating) 3(2)(b), F.S., the	Make che	E eck payable to partment of St		
F	Signature hyped or prined name of registered egent and ILE NOWILL FEE IS \$61.25 nuary 1, 2006, Fee will be \$122.50  OFFICERS AND DIRE	In accordance corporation de	Registered Agent eignet	ure required when reinstating) 3(2)(b), F.S., the e prior notice.  ADDITIONS/CHANG	Make che	eck payable to partment of St DIRECTORS IN	ate 10	
F After Ja	Signature typed or printed name of registered agent and ILE NOW!!! FEE IS \$61.25 nuary 1, 2006, Fee will be \$122.50  OFFICERS AND DIRE  PTD  KANTER, JOHN E  4770 BISCAYNE BLVD, #1150	In accordance corporation d	Registered Agent signat e with s. 607.19 lid not receive th	3(2)(b), F.S., the e prior notice.  ADDITIONS/CHANG PTD 3ERRY BAUMGARTH	Make che Florida Dep ES TO OFFICERS AND ER	eck payable to partment of St	ate	
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12. 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 report or supplemental 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 vustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with at other like empowered.

CITY-ST-ZIP

STREET ADDRESS

TITLE NAME

SIGNATURE: XX

NAMÉ

STREET ADDRESS

CITY-ST-ZIP

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/05

239-694.5259

K. Eckel FEB 1 4 2006