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Secretary of State

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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N98000004627

1. Corporation Name

BAIL AGENT'S INDEPENDENT LEAGUE OF FLORIDA, INC.

Principal Place of Business

**1445 N.W. 14TH TERRACE
MIAMI FL 33125**

Mailing Address

**1445 N.W. 14TH TERRACE
MIAMI FL 33125**



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip **25** Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip **29** Country **30**

3. Date Incorporated or Qualified

08/11/1998

4. FEI Number

65-0859256

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

9. Name and Address of Current Registered Agent

**FILINGS, INC.
3732 N.W. 16TH STREET
FT. LAUDERDALE FL 33311-4132**

10. Name and Address of New Registered Agent

81 Name **Edward Sheppard**

82 Street Address (P.O. Box Number is Not Acceptable)
1445 NW 14 Terrace

83 Miami, Fl.

84 City **Miami** **FL** **85** Zip Code **33125**

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 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 617.0503, Florida Statutes.

SIGNATURE *Edward S. Sheppard*
Signature, typed or printed name of registered agent and, if applicable, (NOTE: Registered Agent signature required when reinstating)

Edward S Sheppard Pres. 5-13-99

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☒ DELETE
NAME **SHEPPARD, EDWARD S**
STREET ADDRESS **1445 N.W. 14TH TERRACE**
CITY-ST-ZIP **MIAMI FL 33125**

TITLE **D** ☒ DELETE
NAME **ALLEN, CHARLES A**
STREET ADDRESS **2800 S. JOHN YOUNG PKWY**
CITY-ST-ZIP **ORLANDO FL**

TITLE **D** ☐ DELETE
NAME **SHEPPARD, WILLIAM I**
STREET ADDRESS **220 S.E. 12TH STREET**
CITY-ST-ZIP **FT LAUDERDALE FL 33316**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **P** ☒ Change ☐ Addition
1.2 NAME **Sheppard, Edward S.**
1.3 STREET ADDRESS **1445 NW 14 Terrace** **Miami, Fl. 33125**
1.4 CITY-ST-ZIP

2.1 TITLE **VP** ☐ Change ☒ Addition
2.2 NAME **Baillie, Russell**
2.3 STREET ADDRESS **720 NW 30 Ave**
2.4 CITY-ST-ZIP **Ocala Fl. 34475**

3.1 TITLE **S** ☐ Change ☒ Addition
3.2 NAME **Sheppard Kelly**
3.3 STREET ADDRESS **220 SE 12 Street**
3.4 CITY-ST-ZIP **Ft. Lauderdale Fl 33316**

4.1 TITLE **T** ☐ Change ☒ Addition
4.2 NAME **Palmer, Kim**
4.3 STREET ADDRESS **3576 W International Speedway Blvd**
4.4 CITY-ST-ZIP **Daytona Beach, Fl 32124**

5.1 TITLE **D** ☐ Change ☒ Addition
5.2 NAME **Nefzger, Mike**
5.3 STREET ADDRESS **1000 Military Trail # D**
5.4 CITY-ST-ZIP **West Palm Beach, Fl. 33415**

6.1 TITLE **D** ☐ Change ☒ Addition
6.2 NAME **Teague Ann**
6.3 STREET ADDRESS **112 E Forsyth Street**
6.4 CITY-ST-ZIP **Jacksonville, Fl. 32202**

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE *Edward S. Sheppard*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-13-99 305-545-7200
Date Daytime Phone #

CR2E037 (11/98)

553396-90026-13
N98000004627

D
Martha Cornell
18899 State Road 52
Land O'Lakes, Florida 34639

D
Mike Kidwell
385 East Main Street
Bartow, Florida 33830

D
Mitch Hilburn
123 South 5th Street
Fort Pierce, Florida 34950

D
Flo Klein
1483 N.W. 7th Ave.
Miami, Florida 33136

D
Janet Collins
2496 Edwards Road
Fort Pierce, Florida 34982

D
David Davis
P.O. Box 370354
Miami, Florida 33137

D
Glenda Segasser
P.O. Box 19761
West Palm Beach, Florida 33416

D
Don Sinclair
1454 N.W. 17th Ave.
Miami, Florida 33125