## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 22 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P24462

(4)

BFHC, INCORPORATED

Principal Place of Business Mailing Address							I FORMINANI FER FANIS DENDE WINDEN NEIMP HAND		IM DIGN BRON	<b>0 0</b>
1055 EAST WAYZATA BLVD SUITE 210 1055 EAST WAYZATA BLV WAYZATA MN 55391-1889					E 210	0				
							3. Date Incorporated or Qualified 05/23/1989		e of Last F <b>0/1996</b>	Report
2. Principal Place of Business			2a. Mailing Address				4. FEI Number		A	pplied For
Cuita And # atm			Suite, Apt. #, etc.				41-1587785			ot Applicable
Suite, Apt. #, etc.			27]				5. Certificate of Status Desired See Required Fee Required			
∠ City & State			City & State				6. Election Campaign Financing			<del> </del>
3		28	.,				Trust Fund Contribution			May Be to Fees
Zıp	Country		Zip C		Country		8. This corporation has liability for i	ntangible t		
4	25	29					Florida Statutes Yes No			
	9. Name and Address of Cur	rent Regis	tered Agent				10. Name and Address of New Re	gistered A	gent	
	IN NEST, JUDITH W.				81	Name				
	O SPYGLASS LANE				82	Street Add	ress (P.O. Box Number is Not Acceptab	le)	***************************************	
N/	APLES FL 33940				83					
					63					
					84	City		171	<b>85</b> Zip	Code
11 Porcus	a) to the province of Continue 607 (	EAO and 6	07 1609 Florida State	iton the n	how	named ser	poration submits this statement for the p	FL		to conjetent
office or	r registered agent for both, in the St	ate of Flori	da. Such change was	authorize	d by	the corporal	tion's board of directors. I hereby accep	the appo	intment as	registered
_	ami fam-iar with, and accept the ob	oganons c	T, Section 607.0505, F	iorida Sia	IUIOS	S.				
SIGNATURE	Signature, typed or printed name of regard red	agent a él ita	if applicanic (NC	DIE Registere	d Age	ent signature regui	red when reinstating)	DATE		
12.	OFFICERS A			13.	·········	·	ADDITIONS/CHANGES TO OFFIC		DIRECTOR	RS IN 12
TITLE	PD DELETE				ITLE				Change	Addition
NAME	KEENAN, WILLIAM T III			1.2 N	AME					
STREET ADORESS				1.3 \$	TREFT	ADDRESS				
COY-SI-ZIP	WAYZATA MN			1.4 0	ITY-S	iT-ZiP				
TITLE	VD		DELETE	211	ITLE				Change	Addition
NAME	MACHACEK, ROBERT J			2 2 N	AMÉ					
STREET ADORESS		).		238	TREET	ADDRESS				
CITY-\$1-7IP	WAYZATA MN		D 051575			ST - ZIP	W-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1			
TITLE			L. DELETE	3 1 T				L	Change	■ Addition
NAME Chourn abunder	.			32 N		1000000	<b>₹</b> .1%	• :		
STRÉET ADURESS	`					ADDRESS				
CITY+ST-ZIF			DELETE	3.4. U		ST - ZIP			Change	Addition
NAME			the second		NAME			ı	vialige	E. AUDITOT
STREET ADORESS	;					ADDRESS				
CITY-ST-ZIF						T-ZIP				
TITLE			☐ DELETE	5.1 T					Change	Addition
NAME				5.2 N	AME				•	
STREET ADORESS	;			538	TREET	ADDRESS				
CITY ST-ZIP				5.40	HY-S	1-710				
TITLE			DELETE	6.1 T	ITLE				Change	Addition
NAME				6.2 N	AME					
STREET ADDRESS	, i			6.3 S	TREET	ADDRESS				
CITY - ST - ZIP	<u> </u>				łTY-S					
informat Lam an	⊵on ∍ndicated on this annual report d	or supplen For the rec	ental annual report is eiver or trustee empo	true and wered to	accu	urate and that	d in Section 119.07(3)(i), Florida Statuter t my signature shall have the same lega rt as required by Chapter 607, Florida S	Leffect as	if made un	ider nath: that

WWW. T NEWNS