

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 APR 27 AM 9:46

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # P39138

(3)

1. Corporation Name

B.L. RICE INTERNATIONAL, INC.

Principal Place of Business

**4134 GULF OF MEXICO DRIVE, SUITE 301
LONGBOAT KEY FL 34228**

Mailing Address

**4134 GULF OF MEXICO DRIVE, SUITE 301
LONGBOAT KEY FL 34228**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
06/05/1992

3a. Date of Last Report
04/19/1994

2. Principal Place of Business

21 2055 Wood Street

2a. Mailing Address

26 2055 Wood Street

Suite, Apt. #, etc.

22 Suite 204

Suite, Apt. #, etc.

27 SUITE 204

City & State

23 Sarasota

City & State

28 Sarasota

Zip

24 34237

Country

25 USA

Zip

29 34237

Country

30 USA

4. FEI Number
65-0337745

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**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PSI**
NAME **RICE, BERNARD L.**
STREET ADDRESS **4134 GULF OF MEXICO DR.**
CITY - ST - ZIP **LONGBOAT KEY FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

**2055 Wood Street, Suite 204
Sarasota, FL 34237**

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Bernard L. Rice, PRESIDENT

DATE

Signature Printed

8/3/95-0992