

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P92000001865 (4)

1. Corporation Name

B. AND A. MITCHELL ENTERPRISES, INC.



Principal Place of Business

1810 SE FIRST ST
CAPE CORAL FL 33990

Mailing Address

1810 SE FIRST ST
CAPE CORAL FL 33990

2. Principal Place of Business

2a. Mailing Address

21	Suite, Apt. #, etc.		26	State, Apt. #, etc.	
22	City & State		27	City & State	
23	Zip	Country	28	Zip	Country
24			29		30

9. Name and Address of Current Registered Agent

MITCHELL, BRYAN D
1810 SE FIRST ST
CAPE CORAL FL 33990

3. Date Incorporated or Qualified

10/28/1992

3a. Date of Last Report

02/02/1995

4. FID Number

65-0372621

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

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

FL

11. Pursuant to the provisions of Sections 607.01(4) and 607.1508, Florida Statutes, the above named corporation submits the 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 duties of Sections 607.01(4) and 607.1508, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	D	[] DELETE
NAME	MITCHELL, BRYAN D	
STREET ADDRESS	1810 SE FIRST ST	
CITY, ST, ZIP	CAPE CORAL FL 33990	
TITLE	D	[] DELETE
NAME	MITCHELL, ANGELA M	
STREET ADDRESS	1810 SE FIRST ST	
CITY, ST, ZIP	CAPE CORAL FL 33990	
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

14	1	1	[] Change	[] Addition
15	2	2	[] Change	[] Addition
16	3	3	[] Change	[] Addition
17	4	4	[] Change	[] Addition
18	5	5	[] Change	[] Addition
19	6	6	[] Change	[] Addition
20	7	7	[] Change	[] Addition
21	8	8	[] Change	[] Addition
22	9	9	[] Change	[] Addition
23	10	10	[] Change	[] Addition
24	11	11	[] Change	[] Addition
25	12	12	[] Change	[] Addition
26	13	13	[] Change	[] Addition
27	14	14	[] Change	[] Addition
28	15	15	[] Change	[] Addition
29	16	16	[] Change	[] Addition
30	17	17	[] Change	[] Addition
31	18	18	[] Change	[] Addition
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42	29	29	[] Change	[] Addition
43	30	30	[] Change	[] Addition
44	31	31	[] Change	[] Addition
45	32	32	[] Change	[] Addition
46	33	33	[] Change	[] Addition
47	34	34	[] Change	[] Addition
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91	78	78	[] Change	[] Addition
92	79	79	[] Change	[] Addition
93	80	80	[] Change	[] Addition
94	81	81	[] Change	[] Addition
95	82	82	[] Change	[] Addition
96	83	83	[] Change	[] Addition
97	84	84	[] Change	[] Addition
98	85	85	[] Change	[] Addition
99	86	86	[] Change	[] Addition
100	87	87	[] Change	[] Addition
101	88	88	[] Change	[] Addition
102	89	89	[] Change	[] Addition
103	90	90	[] Change	[] Addition
104	91	91	[] Change	[] Addition
105	92	92	[] Change	[] Addition
106	93	93	[] Change	[] Addition
107	94	94	[] Change	[] Addition
108	95	95	[] Change	[] Addition
109	96	96	[] Change	[] Addition
110	97	97	[] Change	[] Addition
111	98	98	[] Change	[] Addition
112	99	99	[] Change	[] Addition
113	100	100	[] Change	[] Addition

14. I do hereby certify that the information supplied with this filing is true and correct, and that the information is true and correct, and that my signature shall have the same legal effect as if made under oath. I am an officer or director of the corporation or the name of the officer or director is on the report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on the initial list of officers and directors.

SIGNATURE: *Bryan D Mitchell* Bryan D. Mitchell

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-16-96 772-2453

CR2E034 (12/95)