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

**PROFIT** CORPORATION ANNUAL REPORT



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

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P93000003208 (4)

DOCUMENT # P9	3000003208 (4)	
BARFIELD & ASSOCIATES	, INC.	
Principal Place of Business	Mailing Address	
435 SIMS WAY MERRITT ISLAND FL 32952	435 SIMS WAY MERRITT ISLAND FL 32952	
2 Properties Place of Business	2a Mailing Address	

	THE STATE OF THE	OPIN BRIEB RIN	# 11816 #8181 1861 1881

Suite, Apt. #, etc.    2	MERRITT ISLAND FL 329	MERRITT ISLAND FL 32952						
Suite, Apt. is, etc.    Suite, Apt. is, etc.   Suite, Apt. is, etc.   Suite, Apt. is, etc.   27   Suite, Apt. is, etc.   28   Suite, Apt. is, etc.   27   Suite, Apt. is, etc.   27   Suite, Apt. is, etc.   28   Suite, Apt. is, etc.   27   Suite, Apt. is, etc.   28   Suite, Apt. is, etc.   27   Suite, Apt. is, etc.   28   Suite, Apt. is, etc.   27   Suite, Apt. is, etc.   28   Suite, Apt. is, etc.   29   Suite, Apt. is,								
Suite, April is, etc.    22   23   24   27   25   28   28   29   29   30   20   20   20   20   20   20   20	<b>L</b> ,	SS 28	a. Mailing Address					Applied For
City & State  Ci	[21]	26				59-3159497		Not Applicable
Trust Fund Contribution   Added to Fees    Zep   Country   Zep   Gountry   8. This corporation has liability for intendible tax under is 199.032,    Sep   S	Suite, Apt. #, etc.	27	1			5. Certificate of Status Desired	□ \$	
Trust Fund Contribution			City & State			6. Election Campaign Financing		55.00 May Be
A STATURE STATE OF THE PROTECT RAND DIFFECTORS IN STATE OF THE STATE OF THE PROTECT RAND DIFFECTORS IN 12 Name  BARFIELD, JAMES L JR 435 SIMS WAY MERRITT ISLAND FL 32952  BA City  FL 85 Zip Code	[23]	- · · · <del>-</del> · · · · · · · · · · · · · · · · · · ·	L	<del></del>		Trust Fund Contribution		
BARFIELD, JAMES L JR 435 SIMS WAY MERRITT ISLAND FL 32952  11. Pursuant to the previsions of Sections 607.0502 and 607.1506, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent. I am fertilize with and accept the appointment as registered agent. I am fertilize with and accept the obligations of Section 607.0505. Florida Statutes, the above named corporation's board of directors. I hereby accept the appointment as registered agent. I am fertilize with and accept the obligations of Section 607.0505. Florida Statutes.  S GNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  BLE PD DELETE 1.1 TITLE DAMES  BARFIELD, JAMES L JR 1.3 SIRFET ADDRESS  CITY ST-2P  WERRITT ISLAND FL 1.4 CITY-ST-2P  VP DELETE 2.1 TITLE DAMES  BARFIELD, DARLEEN 2.2 SIME MAY  MERRITT ISLAND FL 2.2 SIME ADDRESS  CITY-ST-2P  MERRITT ISLAND FL DELETE 3.1 TITLE DAMES  SIME ADDRESS  CITY-ST-2P  MERRITT ISLAND FL 3.3 SIREET ADDRESS  CITY-ST-2P  MERRITT ISLAND FL DELETE 3.1 TITLE DAMES  A35 SIMS WAY  A45 SIMS WAY	k , '	ı ·	n '	<b>⊢</b> -¬ ′				ders 199.032,
BARFIELD, JAMES L JR 435 SIMS WAY MERRITT ISLAND FL 32952  83  84 City  FL 85 Zip Code  11. Pursuant to the provisions of Socions 607,0502 and 607,1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent. I am of the provision of branching its registered agent. I am of	h	k		30				
BARFIELD, JAMES L JR 435 SIMS WAY MERRITT ISLAND FL 32952  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 diffice 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 fertilized with a collegations of Section 607.0505, Florida Statutes.  S GNATUR!  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. City   STAME  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  16. BARFIELD, JAMES L JR  17. ASS SIMS WAY  18. SIRELL AURIES  STREET JORIES  MERRITT ISLAND FL  14. City ST-Zip  14. City ST-Zip  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  16. Change   Addition  Add	9. Name	and Address of Current Regi	istered Agent	81	Magao	10. Name and Address of New H	egistered Age	nt
### A35 SIMS WAY MERRITT ISLAND FL 32952  ### City ### City ### A36 City ### A37 SIMS way ### City ### A38 Ci	DADEIELO JAMEI	0 ( ID		"	Name			
MERRITT ISLAND FL 32952    88   City		S L JK		82	Street Ad	ldress (P.O. Box Number is Not Acceptab	le)	. ,,
T1. 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 eigent. I am fermion with, and accept the obligations of, Section 607.0505, Florida Statutes.  SGNATURE  System based or practificate defined authority and accept the obligations of, Section 607.0505, Florida Statutes.  NOTE: Registered Agent tographic required when remaining.  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  ILIER  PD  BARFIELD, JAMES L JR  12. LEAME  12. LAME  12. LAME  12. LAME  445 SIMS WAY  13. STREFT ADDRESS  MERRITT ISLAND FL  14. CITY-5T-7IP  VP  DELETE  22. PAME  445 SIMS WAY  23. STREFT ADDRESS  MERRITT ISLAND FL  24. CITY-5T-7IP  NAME  SHEEL ACCRESS  MERRITT ISLAND FL  24. CITY-5T-7IP  11. TILLE  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. CITY-5T-7IP  14. CITY-5T-7IP  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  16. Change Addition		El 220E2		92	·			
FL	MENNITI ISLAND	FL 32332						
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 agent. If both in this Statio of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am fermion with, and accept the obligations of, Section 607.0508, Florida Statutes.  S GNATURE    Station by reforementations of registered agent. I am fermion by the corporation's board of directors. I hereby accept the appointment as registered agent. I am fermion with a registered agent. I am f				84	City	· · · · · · · · · · · · · · · · · · ·	FL 8	5 Zip Code
Or registered agent, or both, in the State of Floridal Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am fertilization with, and accept the obligations of, Section 607.0505, Floridal Statutes.  S GNATUR:    Signature band or product required agent as a term target call.   (NOTE: Bigotered Agent agent are registered.)	11. Pursuant to the provision	ons of Sections 607.0502 and 6	07.1508, Florida Statutes	s, the above-r	named corp	oration submits this statement for the pur	pose of chargin	Ing its registered office
SQNATURE	<ul> <li>or registered agent, or i</li> </ul>	both, in the State of Florida, Suc	ch chance was authorized	d by the corp	oration's bo	pard of directors. I hereby accept the appoint	ointment as regi	stered agent. I am
12.	S GNATURE	-						
DELETE	<b>-</b>				t signature requ			E07050 III. 40
NAME   BARFIELD, JAMES L JR   12 NAME   13 STREET ADDRESS   435 SIMS WAY   13 STREET ADDRESS   14 CITY-ST-ZIP	the control of the co	OFFICERS AND DIRE				ADDITIONS/CHANGES TO OFF		
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CITY - ST-7IP 5.4 CITY - ST-7IP	CITY+S1-7IF			5 4 CITY-S	T - ZIP			
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CITY ST ZIP 64 CITY-ST-ZIP	CITY ST ZIP			64CITY-S	1 - ZIP			

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 eath; 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:

Jalean Barill DARLEEN BAXFTELD
SIGNATURE AND TYPED OF PRINTED NIME OF SIGNING OFFICER OR DIRECTOR

407-453-5776