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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # P93000011575 (6)

1. Corporation Name THE BATEMAN GROUP, INC. Principal Place of Business P.O. BOX 2726 P.O. BOX 14493 TALLAMASSEE FL 32317 MIAMI FL 33283 TALLAMASSEE FL 32317 MIAMI FL 33187 -4493								
		4493	,		Date Incorporated or Qualified 02/08/1993	3a. Date o	f Last Re 01/199	
	ace of Business	2a. Maing Address			4. FEI Number 65-0387807		<u> </u>	pplied For
21 Suite, Apt. #	#. etc.	Suite. Apt #, etc.			· · · · · · · · · · · · · · · · · · ·			lot Applicable Additional
22		27]			5. Certificate of Status Desired			lequired
City & State	9	Orty & State			6. Election Campaign Financing			May Be
23 Zip	Country	28 Ζιρ	Country		Trust Fund Contribution 8. This corporation has liability for its			to Fees
24 ZIP	25 Country	29	30		_ ·	Intangibie tax i	under S	199.032,
	g. Name and Address of Curren	and the second of the second o			10. Name and Address of New R	tegistered Aç	gent	
			81 N	81 Name				
BATEMAN, BRADFORD S 18301 SW 142AVE 7467 Serna SUITE A206 Tallahamu		. Dec.	82 S	82 Street Address (P.O. Box Number is Not Acceptable) 83				
		FC 32308	83					
	1-33183	, 30300	21				12277777	0-1-
ningin ra 2100			84 C	lity		FL 85 Zip Code		
or register familiar wit	th, and accept the obligations of Sect-	14. Such change was authoriz on 607.0505, Florida Statutes	ed by the corporat :	ned corpora tion's board	d of directors. I hereby accept the app	ointment as re	egistereo	agent runt
familiar wit SIGNATURE	th, and accept the obligations of, Sect- Sgrature typedor printed have streng-based appear OFFICERS ANI	on 607.0505, Florida Statutes अञ्चलकार्वास्त्रकृष्टिक (%) DIRECTORS	r'it Fegislerad Ageni sig 13.	tion's board	When mashifuse ADDITIONS/CHANGES TO OFF	DATE ICERS AND E	DIRECTOR	RS IN 12
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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 attackment with an address SIGNATURE AND TYPED OR PRINTS OF MANE OF SIGNING OFFICER OR DIRECTOR
BRADFORD S. BATEMAN SIGNATURE:

4/18/96

668-2691

Daytime Phone #