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

Mailing Address

PACE FL 32571

3448 FAWNWOOD DR

PROFIT **CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # **P93000016981**1. Corporation Name

BOZEMAN, INC.

Principal Place of Business

3448 FAWNWOOD DR

PACE FL 32571

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2. Principal P	lace of Business	Za.	. Mailing Address				•				ન ૄ	
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Suite, Apt. #, etc.			Suite, Apt. #, etc.				E C. different of Ottober Designed		\$8.75 A	dditional	"	
			27				5. Certifcate of Status Desired		Fee Red	quired		
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City & State	e	Щ	City & State				6. Election Campaign Financing		\$5.00			
23							Trust Fund Contribution		Added to	Fees	1	
Zip	Country Zip			Country			8. This corporation owes the curre	ent year Intar	ngible		1	
¬ '	25	29	30				Personal Property Tax.			□No	1	
24							10. Name and Address of New Registered A			1-4	1	
Name and Address of Current Registered Agent					81 Name		10. Name and Address of New A	egistered r	90		1	
TOTAL POLICE					81 Name						1	
BOZEMAN, REEDY D			82 5			Ctroot Addro	et Address (P.O. Box Number is Not Acceptable)					
3448 FAWNWOOD DR			•			Street Addre	reet Address (F.O. Box Number is Not Acceptable)					
PACE FL 32571			83			<del></del> -						
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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 of 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	•											
0.0.0	Signature, typed or printed name of registered agent	and title	if applicable. (NOTE: 1		Agent	signature required	when reinstating)	DATE		50 111 40	4	
12.	OFFICERS AND	DIRE	CTORS	13.			ADDITIONS/CHANGES TO OFF	ICERS AND			┨.	
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JINEEL MUUREOO	T 54.29											

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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, with all other like empowered.

**FILED** 

Feb 02, 1999 8:00am

**Secretary of State** 

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

03/02/1993

02-02-1999 90008 012 \*\*\*150.00

CR2E034 (11/98)