

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

FILED
Mar 11, 1999 8:00 am
Secretary of State

03-11-1999 90210 040 ***158.75

0465852

| | | |
|--|---|--|
| PROFIT CORPORATION ANNUAL REPORT 1999 |  | FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS |
|--|---|--|

DOCUMENT # P93000021278

1. Corporation Name
CHRISTINE BAZEMORE, INC.



| | |
|--|--|
| Principal Place of Business 6055 CR 675 #116 MYAKKA CITY FL 34251 US | Mailing Address 7282 55TH AVE #116 BRADENTON FL 34203 US |
|--|--|

DO NOT WRITE IN THIS SPACE

| | | | | | |
|--------------------------------|---------------------|---|--|---|--|
| 2. Principal Place of Business | | 2a. Mailing Address | | 3. Date Incorporated or Qualified | |
| 21 6055 CR 675 | 26 6055 C.R. 675 | | | 03/19/1993 | |
| 22 MYAKKA City | 27 MYAKKA City FL | 4. FEI Number | | Applied For | |
| 23 FLA | 28 | 65-0395045 | | Not Applicable | |
| 24 34251 25 MANATEE | 29 34251 30 MANATEE | 5. Certificate of Status Desired | | \$8.75 Additional Fee Required | |
| | | <input checked="" type="checkbox"/> | | | |
| | | 6. Election Campaign Financing Trust Fund Contribution | | \$5.00 May Be Added to Fees | |
| | | <input type="checkbox"/> | | | |
| | | 8. This corporation owes the current year Intangible Personal Property Tax. | | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |

9. Name and Address of Current Registered Agent

WALKER, ADRON H
3119 MANATEE AVE. W.
BRADENTON FL 34205

10. Name and Address of New Registered Agent

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

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|---|---|---|
| TITLE | P <input type="checkbox"/> DELETE | 1.1 TITLE | P <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | BAZEMORE, CHRISTINE | 1.2 NAME | CHRISTINE BAZEMORE |
| STREET ADDRESS | 7782 55TH AVE E SUITE 176 | 1.3 STREET ADDRESS | 6055 CR 675 |
| CITY-ST-ZIP | BRADENTON FL | 1.4 CITY-ST-ZIP | MYAKKA City, FL 34251 |
| TITLE | VP <input checked="" type="checkbox"/> DELETE | 2.1 TITLE | VP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | ALBRITTON, CLAY P | 2.2 NAME | ESTATE OF CLAY P. ALBRITTON |
| STREET ADDRESS | P.O. BOX 100 N/A | 2.3 STREET ADDRESS | 6055 C.R. 675 |
| CITY-ST-ZIP | MYAKKA CITY FL | 2.4 CITY-ST-ZIP | MYAKKA City, FL 34251 |
| TITLE | S <input type="checkbox"/> DELETE | 3.1 TITLE | CHRISTINE BAZEMORE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | CHRISTINE BAZEMORE | 3.2 NAME | |
| STREET ADDRESS | 7282 55TH AVE SUITE 176 | 3.3 STREET ADDRESS | 6055 CR 675 |
| CITY-ST-ZIP | BRADENTON FL | 3.4 CITY-ST-ZIP | MYAKKA City, FL 34251 |
| TITLE | VP <input checked="" type="checkbox"/> DELETE | 4.1 TITLE | VP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | ALBRITTON, CLAY P. | 4.2 NAME | ESTATE OF CLAY P. ALBRITTON |
| STREET ADDRESS | P.O. BOX 100/ 9490 WAUECHULA RD. | 4.3 STREET ADDRESS | 6055 CR 675 |
| CITY-ST-ZIP | MYAKKA CITY FL | 4.4 CITY-ST-ZIP | MYAKKA City, FL 34251 |
| TITLE | T <input type="checkbox"/> DELETE | 5.1 TITLE | CHRISTINE BAZEMORE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | BAZEMORE, CHRISTINE | 5.2 NAME | |
| STREET ADDRESS | 7782 55TH AVE E SUITE 176 | 5.3 STREET ADDRESS | 6055 CR 675 |
| CITY-ST-ZIP | BRADENTON FL | 5.4 CITY-ST-ZIP | MYAKKA City, FL 34251 |
| TITLE | <input type="checkbox"/> DELETE | 6.1 TITLE | |
| NAME | | 6.2 NAME | |
| STREET ADDRESS | | 6.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 6.4 CITY-ST-ZIP | |

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.

SIGNATURE: Christine Bazemore 3/8/99 941-322-1881

CR2E034 (11/98)