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RD CLK 4334

4-19-96

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P93000024005 (9)

1. Corporation Name

B. F. NORMAN, INC.

B.F. NORMAN, INC.

2869 Gatling Blvd.

Orange Park, FL 32065

Principal Place of Business

1179-21 BLANDING BLVD
ORANGE PARK FL 32065

1179-21 BLANDING BLVD
ORANGE PARK FL 32065



3. Date Incorporated or Qualified
03/29/1993

3a. Date of Last Report
05/01/1995

4. FEI Number

59-3182587

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

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

NORMAN, B F

~~2730 KOWA AVE~~

ORANGE PARK FL 32065

B.F. NORMAN, INC.

2869 Gatling Blvd.

Orange Park, FL 32065

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0802 and 607.1008, 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. I, Secretary of State, hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, the registered agent.

SIGNATURE

Signature (Typed or printed name of the agent, if the agent is a natural person)

NOTE: Registered Agent Signature required when re-registering

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME NORMAN, BRIAN F
STREET ADDRESS ~~2730 KOWA AVE~~ 2869 GATLING BLVD
CITY-ST-ZIP ORANGE PARK FL 32065

TITLE
NAME B.F. NORMAN, INC.
STREET ADDRESS 2869 Gatling Blvd.
CITY-ST-ZIP Orange Park, FL 32065

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY-ST-ZIP

5. TITLE
6. NAME
7. STREET ADDRESS
8. CITY-ST-ZIP

9. TITLE
10. NAME
11. STREET ADDRESS
12. CITY-ST-ZIP

13. TITLE
14. NAME
15. STREET ADDRESS
16. CITY-ST-ZIP

17. TITLE
18. NAME
19. STREET ADDRESS
20. CITY-ST-ZIP

21. TITLE
22. NAME
23. STREET ADDRESS
24. CITY-ST-ZIP

14. 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 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 or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-15-96

DATE

DAYTIME PHONE

CR2E034 (12/95)