FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED
95 MAY -1 AM 10:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000037272 (0)**

1. Corporation Name
THE BOHEMIAN SWINGERS, INC.

Principal Place of Business	Mailing Address
710 BEACH TRAIL INDIAN ROCKS BEACH FL 34635	710 BEACH TRAIL INDIAN ROCKS BEACH FL 34635

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 05/21/1993
3a. Date of Last Report: 07/12/1994

2. Principal Place of Business
21 206 8th Avenue N.
22 St. Petersburg
23 FL
24 33701 Zip
25 Pinellas Country

2a. Mailing Address
26
27 P.O. Box 1004
28 Indian Rocks Beach, FL
29 34635 Zip
30 Pinellas Country

4. FEI Number: 59-3193606 ☐ 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

9. Name and Address of Current Registered Agent

LARSON, H W ESQ.
7381 114TH AVENUE NORTH
STE. 406
LARGO FL 34643

10. Name and Address of New Registered Agent

81 Name: Tami R. Simms
82 Street Address (P.O. Box Number is Not Acceptable): 206 8th Avenue N.
83
84 City: St. Petersburg FL 85 Zip Code: 33701

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: Tami R. Simms — Tami R. Simms — 4/24/95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	President ☐ Change ☑ Addition
NAME	ROSICKY, EDWARD J III	1.2 NAME	Michael J. Powel
STREET ADDRESS	710 BEACH TRAIL	1.3 STREET ADDRESS	206 8th Ave. N.
CITY-ST-ZIP	INDIAN ROCKS BEACH FL 34635	1.4 CITY-ST-ZIP	St. Petersburg, FL 33701
TITLE		2.1 TITLE	Treasurer ☐ Change ☑ Addition
NAME		2.2 NAME	Barney G. Waterbury
STREET ADDRESS		2.3 STREET ADDRESS	139 131st Ave E
CITY-ST-ZIP		2.4 CITY-ST-ZIP	Madeira Beach, FL 33708
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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)(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.

SIGNATURE: E. J. Rosicky — 4/27/95 — 813-898-2310
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0370032 CP