

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**CORPORATION
ANNUAL REPORT
1995****FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS****APPROVED
AND
FILED****95 MAR 27 PM 4:33****SECRETARY OF STATE
TALLAHASSEE, FLORIDA****DOCUMENT # P93000045673 (9)**

1. Corporation Name

BADCOCK PROPERTIES, INC.

Principal Place of Business

**200 PHOSPHATE BOULEVARD
MULBERRY FL**

Mailing Address

**200 PHOSPHATE BOULEVARD
MULBERRY FL**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

06/28/1993

3a. Date of Last Report

03/23/1994

4. FEI Number

59-3189378

Applied For

Not Applicable

5. Certificate of Status Desired

☐**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐**\$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

21

Suite, Apt. #, etc.

2a. Mailing Address

26

Suite, Apt. #, etc.

City & State

22

City & State

27

Zip

23

Country

24

Zip

28

Country

29

9. Name and Address of Current Registered Agent

**MEYER, JAMES R
225 SOUTH CENTRAL AVENUE
BARTOW FL 33830**

10. Name and Address of New Registered Agent

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 607.0502 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP**STD
BADCOCK, WOGAN S III
3529 CREWS LAKE DRIVE
LAKELAND FL 33813**TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP**PD
BADCOCK, HENRY C
1976 VISTA VIEW DRIVE
LAKELAND FL 33813**TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP**VD
BADCOCK, BEN M
1202 KELLS COURT
LAKELAND FL 33813**TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP**SD
DAUGHTREY, ELIZABETH B
2418 FAIRMONT AVENUE
LAKELAND FL 33803**TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP**D
STILES, MARY B
1404 BRIARWOOD DRIVE
LAKELAND FL**TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP☐ Change ☐ Addition2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP☐ Change ☐ Addition3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP☐ Change ☐ Addition4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP☐ Change ☐ Addition5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP☐ Change ☐ Addition6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP☐ Change ☐ Addition**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 110.07(3)(b), 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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.**SIGNATURE: *X Henry C. Badcock*SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Henry C. Badcock, President**3/8/95****(813) 425-4921**