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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 1. Corporation Name P94000000228 (4)

Principal Place of Business	Mailing Address
7407 S.E. HILL TERRACE	7407 S.E. HILL TERRACE
HOBE SOUND FL 33455	HOBE SOUND FL 33455

## FILED May 11 1998 8:00am Secretary of State

BBV COMPANY, INC. DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/30/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 Not Applicable 26 65-0461327 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 Personal Properly Tax due June 30. 29 30 10. Name and Address of New Registered Agent 9, Name and Address of Current Registered Agent Name SULLIVAN, JOHN W 7407 S.E. HILL TERRACE Street Address (P.O. Box Number is Not Acceptable) HOBE SOUND FL 33455 83 84 City 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, typod or printed name of requirered agent and title diapproable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE X Change 1.1 TITLE TITLE NAME SULLIVAN, JOHN W 1.2 NAME John W. Sullivan STREET ADDRESS 7407 S.E. HILL TERRACE 1.3 STREET ADDRESS 7407 SE Hill Terrace **HOBE SOUND FL 33455** CITY-ST-ZIP 1.4 CITY-ST-ZIP Hobe Sound, FL 33455 Change X Addition DELETE TITLE 2.1 TITLE NAME 2.2 NAME Susan R. Sullivan STREET ADDRESS 2.3 STREET ADDRESS 7407 SE Hill Terrace CITY-ST-ZIP 2. 4 CITY-ST-ZIP Hobe Sound, FL 33455 DELETE Change **X** Addition TITLE 3.1 TITLE NAME 3.2 NAME William C. Fowler STREET ADDRESS 3.3 STREET ADDRESS 7407 SE Hill Terrace CITY-ST-Z#P 3.4. CITY - ST - ZIP Hobe Sound, FL 33455 DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 44 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 THILE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 C(TY - ST - 2)P CITY-ST-ZIP DELETE Addition TITLE 6.1 TITLE 62 NAME NAME 63 STREET ADDRESS STREET ADDRESS 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 required to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes, or or as a statechnical with in address.

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