

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 # P94000015892 (0)

1. Corporation Name

BOB'S DOOR CONTROL, INC.

Principal Place of Business

P.O. BOX 10666
TALLAHASSEE FL 32302

Mailing Address

%ARNOLD H. SLOTT
334 E. DUVAL STREET
JACKSONVILLE FL 32202



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/24/1994

4. FEI Number

59-3226312

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 owes or has paid the current year intangible
Personal Property Tax due June 30.

☒ Yes

☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

24

Zip

Country

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

29

Zip

Country

30

9. Name and Address of Current Registered Agent

SLOTT, ARNOLD H
334 E DUVAL ST
JACKSONVILLE FL 32202

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DT
NAME BRADBERRY, VICTOR A
STREET ADDRESS 7111 N MAIN ST
CITY-ST-ZIP JACKSONVILLE FL 32208

☐ DELETE

TITLE P
NAME BRADBERRY, MICHAEL A
STREET ADDRESS 7111 N. MAIN ST
CITY-ST-ZIP JACKSONVILLE FL 32208

☐ DELETE

TITLE VP
NAME WINDSOR, ROBERT C
STREET ADDRESS 7111 N. MAIN ST
CITY-ST-ZIP JACKSONVILLE FL 32208

☐ DELETE

TITLE S
NAME BRADBERRY, L. DEANNE
STREET ADDRESS 7111 N. MAIN ST
CITY-ST-ZIP JACKSONVILLE FL 32208

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP Jacksonville, FL 32208

☒ Change ☐ Addition

2.1 TITLE Director, President
2.2 NAME Bradberry, Michael A.
2.3 STREET ADDRESS 7111 Main Street
2.4 CITY-ST-ZIP Jacksonville, FL 32208

☒ Change ☒ Addition

3.1 TITLE Director, Vice President
3.2 NAME Windsor, Robert C.
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP Jacksonville, FL 32208

☒ Change ☒ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP Jacksonville, FL 32208

☒ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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.

CP2E034 (1097)