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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000021022

1. Corporation Name

BADGER BOOKS, INC.

Principal Place of Business	
17141 CYPRESS CREEK DR	

Mailing Address

FILED Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90157 043 ***150.00

|--|--|

17141 CYPRESS CREEK DR N FT MYERS FL 33917-3741		17141 CYPRESS CREEK DR N FT MYERS FL 33917-3741				DO NOT WRITE IN THIS	SPACE	
						3. Date Incorporated or Qualifed 03/15/1994		
2. Principal Place	of Business	2a. Mailing Address				4. FEI Number		Applied For
21		26				65-0480601		Not Applicable
Suite, Apt. #, (etc.	Suite, Apt. #, etc) .			5. Certifcate of Status Desired	•	5 Additional Required
City & State		City & State				6. Election Campaign Financing Trust Fund Contribution		00 May Be ed to Fees
Zip 24	Country 25	Zip 29	Cou	ntry		This corporation owes the current year Inter- Personal Property Tax.	angible XYes	□No _
9. Name and Address of Current Registered Agent				ľ		10. Name and Address of New Registered	Agent	
CADRIE	NER, CHARLES F	. 7		81	Name			
5245 BIG PINE WAY			82 Street Address (P.O. Box Number is Not Acceptable)					
SUITE Ft mys	103 ERS FL 33907			83				

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.

84 City

SIGNATURE	A and Able of a climble	(NOTE: Pos	intered Agent signature re	equired when reinstating) DATE	- ˈ	
12.	Signature, typed or printed name of registered agent and title if applicable (NOTE: Rei		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1		
TITLE	PD DE	LETE	1.1 TITLE		ddition	
	BADGER, KENNETH L		1.2 NAME			
NAME			1.3 STREET ADDRESS			
STREET ADDRESS	17141 CYPRESS CREEK DR					
CITY-ST-ZIP	N FT MYERS FL 33917-3741		1.4 CITY-ST-ZIP	☐ Change ☐ A	ddition	
TITLE	D DE	LEIE	2.1 TITLE	□ Grange (□) ∧	uujijoi i	
NAME)	BADGER, CAROLE J	1	2.2 NAME			
STREET ADDRESS	17141 CYPRESS CREEK DR		2.3 STREET ADDRESS			
CITY-ST-ZIP	N FT MYERS FL 33917-3741		2.4 CITY-ST-ZIP			
TITLE	☐ DE	LETE	3.1 TITLE	Change A	ddition	
NAME			3.2 NAME			
STREET ADDRESS		1	3.3 STREET ADDRESS			
CITY-ST-ZIP			34. CITY-ST-ZIP		_	
TITLE	☐ DE	LETE	4.1 TITLE	Change A	ddition	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		LETE	5.1 TITLE	. Change A	Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS	•		
CITY-ST-ZIP		 .	5.4 CITY-ST-ZIP			
TITLE	☐ DE	LETE	6.1 TITLE	☐ Change ☐ A	Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			6.4 CITY-ST-ZIP			
14 I baraby c	artiful that the information cumplied with this filling does not a	ualify for the	exemption stated	in Section 119.07(3)(i), Florida Statutes. I further certify that the information	tion	

Indicated on this annual report or supplied with this limit does not quality for the exemption stated in Section 118.07(3)(f), Florida Statutes. In order certify that the information did not 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, with all other like empowered.

Zip Code

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