

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Candice B. Murzhum  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **P94000036372 (8)**

1. Corporation Name  
**B.H.R. FINANCE ASSOCIATES, INC.**

Principal Place of Business: **845 VIA LOMBARDI WINTER PARK FL 32789**  
Mailing Address: **845 VIA LOMBARDI WINTER PARK FL 32789**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **05/13/1994**      3a. Date of Last Report: **Not Applicable**  
4. FEI Number: **59-3262401**      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. 1961.032, Florida Statutes:  Yes  No

2. Principal Place of Business: **807 Morse Blvd., Suite Apt #, etc. 200 Winter Park, FL 32789**  
2a. Mailing Address: **215 N. Eola Drive 32801 Orlando, FL 32801**  
24. Zip: **32789**      25. Country: **USA**  
29. Zip: **32801**      30. Country: **USA**

9. Name and Address of Current Registered Agent  
**JOHNSON, LORAN A  
215 NORTH EOLA DR.  
ORLANDO FL 32801**

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: \_\_\_\_\_ (DATE) \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: <b>D</b>	<b>MATIYOW, GERALD</b>	1. TITLE: <b>P</b>	<b>KLINGLER, ROBERT M.</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME: <b>MATIYOW, GERALD</b>	<b>6266 CENTRE PARK DRIVE</b>	1.2 NAME: <b>KLINGLER, ROBERT M.</b>	
STREET ADDRESS: <b>6266 CENTRE PARK DRIVE</b>	<b>WEST CHESTER OH 45069</b>	1.3 STREET ADDRESS: <b>845 VIA LOMBARDY</b>	
CITY, ST, ZIP: <b>WEST CHESTER OH 45069</b>		1.4 CITY, ST, ZIP: <b>WINTER PARK, FL 32789</b>	
TITLE:		2.1 TITLE: <b>EVPO/S</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME:		2.2 NAME: <b>COWAN, CAROL A.</b>	
STREET ADDRESS:		2.3 STREET ADDRESS: <b>241 LAKE GRIFFIN CIRCLE</b>	
CITY, ST, ZIP:		2.4 CITY, ST, ZIP: <b>CASSELBERRY FL 32707</b>	
TITLE:		3.1 TITLE: <b>EVPP/T</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME:		3.2 NAME: <b>STICKEL, THOMAS A.</b>	
STREET ADDRESS:		3.3 STREET ADDRESS: <b>2616 VERONA TRAIL</b>	
CITY, ST, ZIP:		3.4 CITY, ST, ZIP: <b>WINTR PARK, FL 32789</b>	
TITLE:		4.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:		4.2 NAME:	
STREET ADDRESS:		4.3 STREET ADDRESS:	
CITY, ST, ZIP:		4.4 CITY, ST, ZIP:	
TITLE:		5.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:		5.2 NAME:	
STREET ADDRESS:		5.3 STREET ADDRESS:	
CITY, ST, ZIP:		5.4 CITY, ST, ZIP:	
TITLE:		6.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> 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)(b), Florida Statutes. I further certify that the information included 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 on Block 12 or Block 13 of this report, or on an attachment with an address.

SIGNATURE: *Thomas A. Stickel*      4/30/95      (407) 645-5522  
 THOMAS A. STICKEL, EXECUTIVE VICE PRESIDENT