

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

FILED  
Feb 11 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P94000039970 (6)

1. Corporation Name  
BD RESEARCH INC.

Principal Place of Business

Mailing Address

6103 JOHNS ROAD  
SUITE 1  
TAMPA FL 33634

6103 JOHNS ROAD  
SUITE 1  
TAMPA FL 33634

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/23/1994

4. FEI Number

59-3250047

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

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25

29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

POPSON, JOHN M ESQ  
156 BROOKSIDE COURT  
PALM HARBOR FL 34683

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 John M. Popson, Esq.

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

(NOTE: Registered Agent signature required when installing)

DATE

2/4/98

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE TSPD  
NAME BRADSHAW, BRIAN D  
STREET ADDRESS 13540 NORTH FLORIDA AVE STE 107  
CITY-ST-ZIP TAMPA FL 33613

☐ DELETE

1.1 TITLE TSPD  
1.2 NAME BRIAN BRADSHAW  
1.3 STREET ADDRESS 6103 JOHNS ROAD, SUITE 1  
1.4 CITY-ST-ZIP TAMPA, FL 33634

☒ Change ☐ Addition

TITLE DV  
NAME TERCIAC, JEL  
STREET ADDRESS 13540 NORTH FLORIDA AVE STE 107  
CITY-ST-ZIP TAMPA FL 33613

☐ DELETE

2.1 TITLE DV  
2.2 NAME TERCIAC, JEL  
2.3 STREET ADDRESS 6103 JOHNS ROAD, SUITE 1  
2.4 CITY-ST-ZIP TAMPA, FL 33634

☒ Change ☐ Addition

TITLE D  
NAME GIBSON, JAMES  
STREET ADDRESS 13540 NORTH FLORIDA AVE STE 107  
CITY-ST-ZIP TAMPA FL 33613

☒ DELETE

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE V  
NAME PASSARO, JOHN  
STREET ADDRESS 13540 NORTH FLORIDA AVE STE 107  
CITY-ST-ZIP TAMPA FL 33613

☐ DELETE

4.1 TITLE V  
4.2 NAME PASSARO, JOHN  
4.3 STREET ADDRESS 6103 JOHNS ROAD, SUITE 1  
4.4 CITY-ST-ZIP TAMPA, FL 33634

☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

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

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

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.

SIGNATURE BRIAN BRADSHAW

2/2/98

813-888-4500

CR2E034 (10/97)