

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

**APPROVED
AND
FILED**

**CORPORATION
ANNUAL REPORT
1995**



**FLORIDA DEPARTMENT OF STATE
Sylvia B. Munich
Secretary of State
DIVISION OF CORPORATIONS**

95 MAY -1 PM 2:24

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # P94000062606 (6)

1. Corporation Name

BETHESDA MANAGEMENT SERVICES, INC.

Principal Place of Business

**2815 S. SEACREST BLVD.
BOYNTON BEACH FL 33435**

Mailing Address

**2815 S. SEACREST BLVD.
BOYNTON BEACH FL 33435**

200001475542

-05/04/95--01027--018

*****3040.00 ****200.00**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/25/1994

3a. Date of Last Report

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

24

25

2a. Mailing Address

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Suite, Apt. #, etc.

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City & State

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4. FEI Number

65-0523166

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**

7. This corporation has adopted the intangible tax code of 100.00%

Florida Statutes

☐ Yes

☐ No

9. Name and Address of Current Registered Agent

**MONAGHAN, TIMOTHY E
54 NE 4TH AVE.
DELRAY BEACH FL 33435**

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 607.05(2) 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 of person authorized to accept appointment as registered agent

Signature of person authorized to accept appointment as registered agent

Date

12. OFFICERS AND DIRECTORS

12.1

NAME

STREET ADDRESS

CITY, ST, ZIP

12.2

NAME

STREET ADDRESS

CITY, ST, ZIP

12.3

NAME

STREET ADDRESS

CITY, ST, ZIP

12.4

NAME

STREET ADDRESS

CITY, ST, ZIP

12.5

NAME

STREET ADDRESS

CITY, ST, ZIP

12.6

NAME

STREET ADDRESS

CITY, ST, ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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PD

HILL, ROBERT B.

**2815 S. Seacrest Blvd.
Boynton Beach, FL 33435**

TDV

TAYLOR, ROBERT B.

**2815 S. Seacrest Blvd.
Boynton Beach, FL 33435**

D

KIRK, ROGER L.

**2815 S. Seacrest Blvd.
Boynton Beach, FL 33435**

D

PELTZIE, KENNETH G.

**2815 S. Seacrest Blvd.
Boynton Beach, FL 33435**

S

STRAWN, JOEL T.

**54 NE 4th Avenue
Delray Beach, FL 33438**

DP5/1

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNER (OFFICER OR DIRECTOR)

428-95

407 278-9400