

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

FILED
Apr 30 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P94000078862 (7)**

1. Corporation Name

PARTY CITY OF BRADENTON, INC.

Principal Place of Business

Mailing Address

**4475 14TH ST W
BRADENTON FL 34207
US**

**4475 14TH ST
BRADENTON FL 34207
US**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 10/26/1994	
21		26		4. FEI Number 59-3289149	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
22		27		6. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees	
City & State		City & State		7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
23		28			
Zip	Country	Zip	Country		
24		29			

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**REDER, RANDALL O
1080 W. BUSCH BLVD. STE. 103
TAMPA FL 33612**

81	Name	DIANE W. SMITH
82	Street Address (P.O. Box Number is Not Acceptable)	4475 14th ST W
83		
84	City	BRADENTON
85	Zip Code	FL 34207

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 *Diane W. Smith* **DIANE W. SMITH SECRETARY** **4/23/98**
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
<input type="checkbox"/> DELETE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE	P	1.1 TITLE	
NAME	WOLFE, WILLIAM A	1.2 NAME	
STREET ADDRESS	1177 NO. DALE MABRY HIGHWAY	1.3 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL 33618	1.4 CITY-ST-ZIP	
TITLE	V	2.1 TITLE	
NAME	WOLFE, ELIZABETH J	2.2 NAME	
STREET ADDRESS	1177 NO. DALE MABRY HIGHWAY	2.3 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL 33618	2.4 CITY-ST-ZIP	
TITLE	S	3.1 TITLE	SECRETARY
NAME	WOLFE, MARY JANE	3.2 NAME	DIANE W. SMITH
STREET ADDRESS	4840 48TH ST W 604	3.3 STREET ADDRESS	6115 56TH TERR E
CITY-ST-ZIP	BRADENTON FL	3.4 CITY-ST-ZIP	BRADENTON FL 34203
TITLE	T	4.1 TITLE	
NAME	WOLFE, MARK W	4.2 NAME	
STREET ADDRESS	4840 48TH ST W 604	4.3 STREET ADDRESS	11115 MARIGOLD DR
CITY-ST-ZIP	BRADENTON FL	4.4 CITY-ST-ZIP	BRADENTON FL 34202
TITLE		5.1 TITLE	V
NAME		5.2 NAME	EDWARD K. SMITH
STREET ADDRESS		5.3 STREET ADDRESS	6115 56TH TERR E
CITY-ST-ZIP		5.4 CITY-ST-ZIP	BRADENTON FL 34203
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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: *Diane W. Smith* **DIANE W. SMITH** **4/23/98** **941-727-8887**

CR2E034 (10/97)