SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
Division of Corporations

FILED
95 JUL 28 AM 9:40

DOCUMENT # **P94000079371 (8)**

1. Proposed Name:

BAD PROPERTIES, INC.

Principal Place of Business:
317 E. CALL STREET
TALLAHASSEE FL 32301

Mailing Address:
317 E. CALL STREET
TALLAHASSEE FL 32301

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **10/28/1994**
3a. Date of Last Report:

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. # or Other — 22 / 27
City & State — 23 / 28
Zip — 24 / County — 25 / Zip — 29 / County — 30

4. FEI Number: ~~59-55-1584~~ ☐ Applied For ☒ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Person Filing Document ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangibles tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

DYE, DON D
317 E. CALL STREET
TALLAHASSEE FL 32301

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 (Typed or Printed Name of Registered Agent and Title if Applicable) (If Registered Agent signature required after formatting) DATE

12. OFFICERS AND DIRECTORS		13. Additions, Changes, Deletions	
01 Title	D	11 Title	☐ Change ☐ Addition
02 Name	DYE, DON D	12 Name	
03 Street Address	317 E. CALL STREET	13 Street Address	
04 City, St, ZIP	TALLAHASSEE FL 32301	14 City, St, ZIP	
05 Title	D	21 Title	☐ Change ☐ Addition
06 Name	BOUTIN, N. RICHARD JR.	22 Name	
07 Street Address	822 N. MONROE STREET	23 Street Address	
08 City, St, ZIP	TALLAHASSEE FL 32303	24 City, St, ZIP	
09 Title		31 Title	☐ Change ☐ Addition
10 Name		32 Name	
11 Street Address		33 Street Address	
12 City, St, ZIP		34 City, St, ZIP	
13 Title		41 Title	☐ Change ☐ Addition
14 Name		42 Name	
15 Street Address		43 Street Address	
16 City, St, ZIP		44 City, St, ZIP	
17 Title		51 Title	☐ Change ☐ Addition
18 Name		52 Name	
19 Street Address		53 Street Address	
20 City, St, ZIP		54 City, St, ZIP	
61 Title		61 Title	☐ Change ☐ Addition
62 Name		62 Name	
63 Street Address		63 Street Address	
64 City, St, ZIP		64 City, St, ZIP	

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*****225.00 *****225.00

14. I hereby certify that the information supplied with this filing is, to the best of my knowledge, 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 11 or Block 12 if changed or added.

SIGNATURE: [signature] 6-14-95 904-224-1205
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (3/95)

0004592 CP