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→ PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P94000083922**1. Corporation Name

BRADFORD V. HUNTER CORP.

Principal Plac	ce of Business	Mailing Address			-		Athit Anii Daill A	DII) BBIB) IBIBE	4000 JUNE	15818 1185 1885
1401 CAMBRIDGE DRIVE CLEARWATER FL 33756 US		1401 CAMBRIDGE DRIVE CLEARWATER FL 33756 US					NOT WRITE	IN THIS SP/	ACE	
						3. Date incorporated o 11/14/1994	r Qualifed			
2. Principal F	Place of Business	2a. Mailing Address				4. FEI Number			Api	plied For
21		26				59-32 <u>745</u> 53			No	t Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5, Certifcate of Status	Desired [\$		Additional
22						S. Scrinceto S. Citatas			Fee Re	quired
City & Sta	te	City & State				6. Election Campaign : Trust Fund Contribu	- 1	_ ;	\$5.00 Added to	- 1
Zip	Country	Zip	Count	try		8. This corporation ow	es the current	year Intangii	ble	
24	25	29	30			Personal Property T				□No
	9. Name and Address of Current	Registered Agent				10. Name and Address	of New Reg	istered Age	nt	
LITTE	ITER, BRADFORD V	N. N. T. F. F.	8	31 N	ame					
	1 CAMBRIDGE DRIVE	•	8	32 S	treet Addre	ess (P.O. Box Number is N	lot Acceptable	·)		
	ARWATER FL 34616							-	<u> </u>	<u> </u>
OLL.	ARTIAILE I L STOID		8	33					, . · · · .	. 14일 등
	•		8	34 C	ity			8:	5 Zip C	ode
	er central control	28 1 Sec. 2 1 1 1 1						FL		
1 1 No. 10 2 4 4 1 2							ant for the new	pose of char	nging its i	registered L
11. Pursuant	to the provisions of Sections 607.0502	? and 607.1508, Florida Sta of Florida. Such change wa:	nutes, the abc s authorized b	ove-na	med corpor corporation	oration submits this statem n's board of directors. I he	reby accept th	e appointme	ent as rec	pistered
office or i	to the provisions of Sections 607.0502 registered agent, or both, in the State of the familiar with, and accept the obligations.	of Florida. Such change was	s authorized b	ov the	med corpor corporation	oration submits this statem n's board of directors. I he	reby accept th	e appointme	ent as reg	gistered
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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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

FILED

Jan 21, 1999 8:00am

Secretary of State 01-21-1999 90025 009 ***150.00