

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

FILED
May 07 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P94000093760 (4)**

1. Corporation Name

BINGHAM REALTY DEVELOPMENT, INC.

Principal Place of Business

**7335 GALL BLVD.
ZEPHYRHILLS FL 33541**

Mailing Address

**7335 GALL BLVD.
ZEPHYRHILLS FL 33541-4372**



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 12/29/1994	3a. Date of Last Report 05/01/1996
21	22	26	27	4. FEI Number 59-3315852	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
23	24	28	29	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	
Zip	Country	Zip	Country		

9. Name and Address of Current Registered Agent

**BINGHAM, JAMES H.
7335 GALL BLVD.
7335 GALL BLVD. #2
ZEPHYRHILLS FL 33541**

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

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	
TITLE	DP <input type="checkbox"/> DELETE	1.1 TITLE	DP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BINGHAM, JAMES H	1.2 NAME	James H. Bingham II
STREET ADDRESS	7335 GALL BLVD.	1.3 STREET ADDRESS	7335 GALL BLVD.
CITY-ST-ZIP	ZEPHYRHILLS FL 33541	1.4 CITY-ST-ZIP	Zephyrhills FL 33541
TITLE	SD <input type="checkbox"/> DELETE	2.1 TITLE	DVP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BINGHAM, ANN C.	2.2 NAME	James H. Bingham
STREET ADDRESS	38060 DOCKSIDE PLACE	2.3 STREET ADDRESS	7335 GALL BLVD.
CITY-ST-ZIP	DADE CITY FL	2.4 CITY-ST-ZIP	Zephyrhills FL 33541
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DP James H. Bingham II

4-30-97

813-788-8490

Date

Daytime Phone #

CR2E034 (9/96)