SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # P95000040076 (8)

B & B	OF LEE COUNTY, INC.				I HERITERI ME IRRAT RIMI BRUM BENIN BENIN BRUK BRUK BIRUK BRUM BRUM BRUM IRRA BUM IRRA	
Principal Plac	ce of Business	Mailing Address				
3436 WILLARD STREET FORT MYERS FL 33916		3438 WILLARD S FORT MYERS FL				
					3. Date Incorporated or Qualified 3a. Date of Last Report 05/18/1995	
2. Principal F	lace of Business	2a. Mailing Addre	SS		4. FEI Number Applied For	
21 Same		26 Same			65-0583141 Not Applicable	
Suite, Apt. #, etc		Suite, Apt. #, e	etc		5. Certificate of Status Desired \$8.75 Additional	
22		27			Fee Required	
City & State		City & State			6. Election Campaign Financing \$5.00 May Be	
Zip Country					Trust Fund Contribution Added to Fees	
24	25	29	30	ıу	8. This corporation has liability for intaggible tax under s. 199,032, Florida Statutes Yes No.	
.=-1	9. Name and Address of Curr				10. Name and Address of New Registered Agent	
0.41			8	1 Nan	lame	
	LUON, GEORGE		ļ.,	n 0	No Add	
	38 WILLARD STREET		0	2 Stre	et Address (PO, Box Number is Not Acceptable)	
FU	PRT MYERS FL 33916		8	3		
			_	4 City	C.	
				1 - 7	FL T T T T T T T T T	
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 typical or printed many of he jistered a	***************************************		gent signal	grafise required when reinstating? DATE	
12. TITLE	(· · · · · · · · · · · · · · · · · · ·	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
NAME	President	L DEL			Vice Pr∋sident	
George Militie					Barbara Arthur	
CITY-ST-ZIP	3438 Willard Ft. Myers, F				4125 CR /6 W.	
TITLE	10. 11,015, 1	DEL	14 CITY ETE 21 TILLE		Labelle, Florida 33935 Change Addition	
NAME		Lul 200	2.2 NAMI		Comega C. Adultoni	
STREET ADDRESS				- El aciores	BFSS	
CITY-ST-ZIP			2 4 CITY			
TITLE		DEL			Change Addition	
NAME			3.2 NAM			
STREET ADDRESS			3 3 \$188	ET ADDRES	RESS	
CITY-ST-ZIP		-17-77 77 77 77 77 77 77 77 77 77 77 77 77	3.4 City	- 51-712	הן	
TITLE		D£L	ETE 41 TITLE		Change Addition	
NAME			4 2 NAM	Ε		
STREET ADDRESS				et addres		
CHTY-ST-ZIP		T DC:	4.4 CHY			
TITLE NAME		L DEi			Change Addition	
STREET ADORESS			5.2 NAM:			
STREET ADDRESS				et addres		
TITLE		DEL	54 C/TY - 61 T/TLE		P Change Addition	
NAME			62 NAME			
STREET ADDRESS				: Et adores	ntce	
CITY - ST - ZiP			6.4 CITY			
	by certify that the information suppl	ied with this filing is volunt	arily furn shed and	does n	s not qualify for the exemption stated in Section 119 07(3)(k), Florida Statutes 1	

further certify that the information inclinated 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with a fiddress

GNATURE:

George Million

GO/10/96

G941)334-2100

Chapter AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Light Control of the exemption stated in 19 07(3)(k), Florida Statutes I for the exemption stated in the exemption stated in 19 07(3)(k), Florida Statutes I for the exemption stated in the modern signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with a finderess

O6/10/96

G941)334-2100

SIGNATURE:

06/10/96 (941)334-2100