FILE NOW: FILING FEE AFTER MAY 1 IS \$550:00

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000063540 (5)

BULLDOG BROOKS CORPORATION

Principat	Place of Business	

Mailing Address

1816 SOUTH OSPREY AVENUE

1816 SOUTH OSPREY AVENUE

FILED May 19 1997 8:00am Secretary of State



SARASOTA FL	34239	SARASOTA F	SARASOTA FL 34239-3613									
							3.	Date Incorporated or Qualified 08/16/1995		te of Last F 1/1996	leport	
2. Principal Pi	. Principal Place of Business 2a. Mailing Address						4.	, FEI Number		A	oplied For	
21		26	26				65-0620755				ot Applicable	
Suite, Apt.	#, etc.	Suite, Ar	Suite, Apt #, etc.				5.	i. Certificate of Status Desired	ificate of Status Desired S8.75 Additional Fee Required			
City & State	3	Cily 8 St	late				6.	i. Election Campaign Financing Trust Fund Contribution		,	May Be to Fees	
Zip	Country	Zip		Courit	гу		8	. This corporation has liability for	intangible	tax under s	. 199.032,	
24	25	29		30					X Yes [
	9. Name and Address of Curren	t Registered Age	ent				10). Name and Address of New R	egistered #	\gent		
	ARLAND, JOSEPH B.			8	יןי	Name						
	W. KENNEDY BLVD.			8	2 3	Street Addre	>ss ((P.O. Box Number is Not Accepta	ible)			
	E 750			8	2							
IAM	PA FL 33609]							
				8		City			FL	'	Code	
11. Pursuant office or reagent. La	to the provisions of Sections 607.050 egistored agent, or both, in the State m familiar with, and accept the oblig.					namod corporation			purpose of ept the app	ointment as	s registered	
12.	OF HIGHRS AN		. (1407	13.		Signature require	-	ADDITIONS/CHANGES TO OFFI		DIRECTO	RS IN 12	
TITLE	PD		DELFTE	1,1 1114	:					Change	Addition	
NAME	BROOKS, GRAHAM D			1.2 NAM	Ē							
STREET ADDRESS	1816 SOUTH OSPREY AVENU	E		1.3 STRE	1A 13	DDRESS		•				
CITY-ST-ZIP	SARASOTA FL 34239			1.4 CITY	· \$1-	ZIP						
TITLE	ST	L	DELETE	2.1 TITL						Change	Addition	
NAME	HARDING, JENNIE P	-		2.2 NAM								
STREET ADDRESS	1816 SOUTH OSPREY AVENU SARASOTA FL 34239	E		2.3 STRE								
CITY-ST-ZIP TITLE	SAMSOIN FL 34239	·	DELETE	2.4 City 3.1 Titul		- 219				Change	Addition	
NAME		·		3.2 NAM								
STREET ADDRESS				3 3 STRE		DDRESS					,	
CITY-ST-ZIP				3 4. CITY	7-\$1-	-ZIP						
TITLE		Ţ	DELETE	41 1111	-					Change	Addition	
NAME				4, 2 NAN	AE-							
STREET ADDRESS				4.3 STRE	ET AI	DDRESS						
CITY-ST-ZIP			55.54	4.4 CITY		ZIP				Change	Addition	
TITLE		1	DELETE	51 101						Change	Addition	
NAME				5.2 NAM		pporce						
STREET ADDRESS				5.3 STRI								
CITY-ST-ZIP TITLE			DELETE	5.4 CITY 6.1 TITU		· (H.				Change	☐ Addition	
NAME		•		6.2 NAM						0-	_	
STREET ADDRESS						DORESS						
CITY-ST-ZIP				6.4 CITY								
						411-1-		O .: 440 07/01/01 Ft- 1-1- Dt-1	ten I Contlem		4 4 5 5	

I do hereby certify that the information supplied with information indicated on this annual report or supplied the man officer or director of the corporation or fine appears in Block 12 or Block 13 if changos, or or or filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the orbital annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that piver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

andari- con