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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P95000073230 (1)

BFH CONSULTING, INC.

Principal Place of Business

Mailing Address

12546-108TH STREET NORTH LARGO FL 34648

12546-108TH STREET NORTH LARGO FL 33778-2714

FILED Apr 16 1997 8:00am Secretary of State



EMIOO TE OTOTO			·	
		· ·	 Date Incorporated or Qualified 09/21/1995 	3a. Date of Last Report 06/21/1996
2. Principal Place of Business	2a. Mailing Address	SAC DIA!	4. FEI Number	Applied For
21 1055 RIVERSIDE RIDE		SIDE RIDE		Not Applicable
Suite, Apt #, etc ROAT	Suite, Apt. #, etc.	ROAL	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23 TARPON SPRINGS, FL	_ 28 TARPON SP		Trust Fund Contribution	Added to Fees
71D Country 24.3+689 25 PINELLAS	29 34689 30	Country	AS This corporation has liability for in Florida Statutes	ptangible tax under s. 199.032, Yes No
9. Name and Address of Currer			10. Name and Address of New Reg	pistered Agent
HEIDTMAN, BRIAN		81 Name		
ADDAG AGOTH OTDEET MODTH			82 Street Address (P.O. Box Number is Not Acceptable)	
LARGO FL 34648		0		
		83		
		84 City		FL 85 Zip Code
11. Pursuant to the provisions of Sections 607.050	12 and 607 1508 Florida Statutes	the above-named	corporation submits this statement for the n	
office or registered agent, or both, in the State agent. Lam familiar with, and accept the oblig	of Florida. Such change was autrations of, Section 607.0505, Florid	norized by the corp la Statutes.	oration's board of directors. I hereby accept	t the appointment as registered
SIGNATURE Soje above, Typoid or practice training of registered age	ent and fifte-I appricable (NOTE: Ri	agistered Agent signature		DATE
12. OFFICERS AN	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	
THLE	☐ DELETE	1.1 TITLE	D	Change Addition
NAME HEIDTMAN, BRIAN		1.2 NAME	HEIDTMAN, BRIAN 1055 RIVERSIDE RI	DEF POAD
STREET ADDRESS 12548 108TH STREET NORTH		1.3 STREET ADDRESS	1035 RIVERSIDE F	5 4 60
CHY-S1-ZIP LARGO FL 34648		1.4 CITY-ST-ZIP	TAKPON SPRINGS,	+ 4 34609
TIFLE	L_) DELETE	2.1 TITLE	D	Change L Addition
NAME HEIDTMAN, CYNTHIA M		2.2 NAME	HEIDTHAN, CYNTHI	7 7 7 7 7 7 7 7 7
STREET ADDRESS 12546 108TH STREET NORTH		2.3 STREET ADDRESS	1055 RNERSIDE A	SID GE KOAD
CITY-ST-7/P LARGO FL 34648		2. 4 CITY-ST-ZIP	TARPON SPRINGS, D HEIDTHAN, CYNTHI 1055 RIVERSIDE A TARPON SPRINGS,	FL 34687
Tille	[_] DELETE	3.1 TITLE		Change Addition
NAME	1	3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
C-TY-ST-7IP		3.4. CITY-ST-ZIP		Change Addition
1016	L_] DELETE	4.1 TOLE		Change Addition
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		•
CHY-ST-ZIP	T or ear	4.4 CiTY-ST-ZiP		Charge Laterian
THTLE	∟_ DELET€	5.1 TITLE		Change Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		1
CHY-ST ZIF	F-1 65, 575	5.4 CITY - ST - ZIP		Change Addition
THLE	DELETE	6.1 TITLE		Change Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CHY-ST-ZiF		6.4 CITY - ST - ZIP		
14 Lide hereby cortify that the information symplic	ad with this filing dose not qualify f	or the evenintion s	tatad in Section 119.07(3)(i). Florida Statuté	s liumner cemity that the

information indicated on this annual report or supplied with this initing does not quality 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: