

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Matheson
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000077819 (7)

1. Corporation Name

BROADNAX TRANSFER, INC

Principal Place of Business

902 S EMPIRE ST
PLANT CITY FL 33566

Mailing Address

902 S EMPIRE ST
PLANT CITY FL 33566

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

9. Name and Address of Current Registered Agent

BROADNAX, ROLAND H
902 S EMPIRE ST
PLANT CITY FL 33566

3. Date Incorporated or Qualified

10/02/1995

3a. Date of Last Report

4. FID Number

59-1641989

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 198.032,
Florida Statutes: ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

DEVAN R. BROADNAX

82 Street Address (P.O. Box Number is Not Acceptable)

83 1502 ESSEX DRIVE

84 City PLANT CITY

FL

85 Zip Code 33566

11. Pursuant to the provisions of Sections 607.0642 and 607.1506, 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 I accept the obligations of Section 607.1506, Florida Statutes.

SIGNATURE

Devan R. Broadnax

DEVAN R. BROADNAX, President

3/25/96

12. OFFICERS AND DIRECTORS

TITLE

President (P)
Roland H. Broadnax
902 S. Empire St.
Plant City, Fl. 33566

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

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NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE

1. NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2. TITLE

2. NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3. TITLE

3. NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4. TITLE

4. NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5. TITLE

5. NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6. TITLE

6. NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

7. TITLE

7. NAME

7.3 STREET ADDRESS

7.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not certify for the exemption stated in Section 119.07(3)(k), 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:

Devan R. Broadnax President

3/25/96

(813)

754-2656

CR2E034 (12/95)