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

**PROFIT** CORPORATION ANNUAL REPORT



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

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P95000087361 (8)

DOCUMENT #  1. Corporation Name	P95000087361	(8

BONJ	OUR AND COMPANY, INC.				
Principa' Place	of Business	Mailing Address			
140 CHAUC LAKE MARY	CER LANE NORTH Y FL 32746	140 CHAUCER LANE LAKE MARY FL 32740			
				3. Date Incorporated or Qualified 3a. 11/13/1995	Date of Last Report
2. Principal Pla	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59 - 3344276	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	)	City & State		6. Election Campaign Financing  1 rust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for intangib	· · · · · · · · · · · · · · · · · · ·
24	25	29	30	Florida Statutes Yes No	
	9. Name and Address of Current	Registered Agent	01 1	10. Name and Address of New Register	red Agent
			81 Name		
	OUR, RICHARD L		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
140 CHAUCER LANE NORTH			83		
LAKE	MARY FL 32746		53		
			84 City	E	85 Zip Code
11 Pure cant t	o the provisions of Sections 607 0502	and 607 1508. Florida Statute	s the above parned corre	ration submits this statement for the purpose of	Changing its registered office
or register	ed agent, or both, in the State of Florid th, and accept the obligations of, Section	<ul> <li>a. Such change was authorize</li> </ul>	od by the corporation's bo:	and of directors. Thereby accept the appointmen	it as registered agent. Lam
	in, and accept the obligations of, Section	on 607.0505, Florida Statutes.			
SIGNATURE .	Signature, typind or printed name of registered agent a	notice tags cable (NO)	E: Registered Agent signature respon	provides remotating DAN	
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TULE	PD	☐ DELETE	1. 1 TITLE		☐ Change ☐ Addition
NAME	BONJOUR, RICHARD L		1.2 NAME		
STREET ADDRESS	140 CHAUCER LANE NORTH	1	1.3 STREET ADDRESS		
CITY-ST-ZIP	LAKE MARY FL 32746		1.4 CITY - ST - ZIP		
TITLE	VSTD	DELETE	2 1 1111.5		Change Addition
NAME	BONJOUR, DEBORAH L		2 2 NAME		
STHEET ADDRESS	140 CHAUCER LANE NORTH	1	2.3 STREET ADDRESS		Į
CITY ST-ZIP	LAKE MARY FL 32746		2.4 CITY - S1 - ZIP		. 1
1111.6		☐ DELETE	3 1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			33 STHELL ADDRESS		
CITY - ST - ZIG			3.4 CITY - ST - ZIF		
TITLE		☐ DELETE	4 1 TITLE		Change Addition
NAME			4 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
C:TY-ST-Z:P		There is a	4.4 CHY - ST - 7IP		Change D Addition
TITLE		☐ DELETE	5 1 11/100		Change
NAME OTREST ADDOCOS			5.2 NAME		• • • • • • • • • • • • • • • • • • •
STREET ADDRESS			5.9 STREET ADDRESS		ĺ
CITY - ST - ZIP		DELETE	5.4 CITY - ST. ZIP 6.1 TITLE		Change Addition
TITLE NAME					C cuange C Appril
NAME STREET AUDRESS			6.2 NAME 6.3 STREET ADDRESS		
SINULI ADDRESS	ì		U D DITTLE MOUPLOD		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify 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 change. It is not a statement with an address.

SIGNATURE:

Killard L. Bonfow

WIRE AND TYPED OR PRINTED NAME OF SIGNING PRICES OR DIRECTOR

4-2-96

407-321-9273 Daytone Propine 1