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 # P96000002835 (2)

BBN ENTERPRISES OF NORTHWEST FLORIDA, INC.

FILED Feb 28 1997 8:00am Secretary of State



 Principal Place of I 	Business	Mailing Address			<u> </u>			
1201 EGLIN PARKWAY		1201 EGLIN PARKWAY						
SHALIMAR FL 3257		SHALIMAR FL 32579-12	106					
						3. Date Incorporated or Qualified 3a. Date of Last Report 01/05/1996		
2. Principal Place	of Business	2a. Mailing Address				4. FEI Number Applied		
1		26				59-3379586 Not App		
Suite, Apt. #, et	(t)	Suite, Apt. #, etc.				5. Certificate of Status Desired See Required Fee Required		
City & State		City & State				6. Election Campaign Financing \$5.00 May I		
3		28	1			Trust Fund Contribution		
Zір 4]	Country 25	Zip [29]	30	ountry		8. This corporation has liability for intangible tax under s. 199.0 Florida Statutes Yes No		
	Name and Address of Curre	······	,			10. Name and Address of New Registered Agent		
CHESSE	er. D M			81	Name			
	GLIN PARKWAY			82	Street Add	oldress (P.O. Box Number is Not Acceptable)		
SHALIM	AR FL 32579							
				83				
				84	City	85 Zip Code		
				_		orporation submits this statement for the purpose of changing its regi		
SIGNATURE						ration's board of directors. I hereby accept the appointment as regist		
Sign a 1 2.	i'in Typed or partitud anne of registered ag	ent and title 4 appropable (I ID-DIRECTORS	NOTE: Registr		nn: signature requ	quired when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN		
ini P	OFFICE	DELETE		TITLE		Change		
, -	EHSERLE, NANCY R			NAME				
	201 EGLIN PARKWAY				ADDRESS			
	HALIMAR FL 32579			I CITY-S	- 1			
ITLE V								
er		[] DELETE	21	TITLE	i i	Change		
	PEER, BARBARA	[] DELETE	1	TITLE NAME		Change		
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Left of fireby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, if further certify that the information indicated on this armual 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 Laman 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 Brock 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Nancy R. Mehserle Mancy R mehserle 7:0272