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May 01 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000009344 (8)

1. Corporation Name
BENEFICIAL RESOURCE MANAGEMENT SERVICES, INC.



Principal Place of Business

12200 LANDFAIR STREET
SPRING HILL FL 34608

Mailing Address

12200 LANDFAIR STREET
SPRING HILL FL 34608-1534

3. Date Incorporated or Qualified

01/26/1996

3a. Date of Last Report

2. Principal Place of Business

21 5331 COMMERCIAL WAY

2a. Mailing Address

26 5331 COMMERCIAL WAY

4. FEI Number

59-3366703

Applied For

Not Applicable

Suite, Apt. #, etc.

22 304

Suite, Apt. #, etc.

27 304

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

City & State

23 SPRING HILL, FL

City & State

28 SPRING HILL, FL

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

Zip

24 34606

Country

25 USA

Zip

29 34606

Country

30 USA

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

SASSER, DAVID G.
29 SOUTH BROOKSVILLE AVENUE-
BROOKSVILLE FL 34601

10. Name and Address of New Registered Agent

81 Name

JONES, JAMES R.

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

7141 MARINER BLVD.

83

84 City

SPRING HILL

FL

85 Zip Code

34609

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, 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 accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4/21/97

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME BOWMAN, SUSAN M
STREET ADDRESS 12200 LANDFAIR STREET
CITY-ST-ZIP SPRING HILL FL 34608

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
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CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PRESIDENT ☒ Change ☒ Addition

1.2 NAME BOWMAN, SUSAN M
1.3 STREET ADDRESS 12200 LANDFAIR ST
1.4 CITY-ST-ZIP SPRING HILL, FL 34608

2.1 TITLE VICE-PRESIDENT ☐ Change ☒ Addition

2.2 NAME ELIZABETH G. HORD
2.3 STREET ADDRESS 516 STAFFORD AVE
2.4 CITY-ST-ZIP BROOKSVILLE, FL 34601

3.1 TITLE SECRETARY/TREASURER ☐ Change ☒ Addition

3.2 NAME ELIZABETH A. DAVIS
3.3 STREET ADDRESS 25112 CAMP CASTLE RD.
3.4 CITY-ST-ZIP BROOKSVILLE, FL 34601

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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:

SUSAN M. BOWMAN
PRESIDENT

4/19/97

Date

(352) 597-5067

Daytime Phone #

CR2E034 (9/96)