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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 21 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000009344 (8)

BENEF	ICIAL RESOURCE MANAGE	EMENT SERVICES, INC				
Principal Plac	ce of Business	Mailing Address				388 1010 1010 1110 1110 1110 1110 1110 1
5331 COMMERCIAL WAY STE 204		5331 COMMERCIAL WAY STE 204		DO NOT WINTE IN	17110 00405	
SPRING HILL FL 34606 US		SPRING HILL FL 34606 US		DO NOT WRITE IN  3. Date Incorporated or Qualified	THIS SPACE	
00		00			01/26/1996	
2. Principal P	lace of Business	2a. Mailing Address		<del>-</del>	4. FEI Number	Applied For
21		26		59-3366703	Not Applicable	
Suite, Apt. #, etc.		Suito, Apt. #, etc.			CR 75 Additional	
22 Suite 2017		27 Suite. 207		5. Certificate of Status Desired	Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
23	<del></del>	28	<del></del>			Added to Fees
Zip Country		<sub>1</sub> Z <sub>I</sub> p	Country		8. This corporation owes or has paid the current year Intangible	
24	25 9. Name and Address of Curre	nt Begistered Agent	[30]		Personal Property Tax due June 30  10. Name and Address of New Regis	
		in negistered Agent	81	Name	10, Name and Address of New Regis	neleu Agein
	NES, JAMES R					
7141 MARINER BLVD Spring Hill Fl 34609		82 Street Add		ress (P.O. Box Number is Not Acceptable)		
ŞF.	NING FILL FL 34009		83	<del></del>		···
			84	City		FL 85 Zip Code
11. Pursuant office or r	to the provisions of Sections 607.050 registered agent, or both, in the State	02 and 607.1508, Florida Statule of Florida Such change was	tes, the above	e-named corp y the corporat	noration submits this statement for the purplion's board of directors. I hereby accept t	pose of changing its registered he appointment as registered
	arrianina with and accept the cong	panona or, accitori cozzogo, er	onoa siaiule	ъ.		
SIGNATURE	Signature, typied or printed name of registered ap-	pent and title diapplicable (NO)	H . Registered Ag	ent signature requir	red whon reinstating)	DATE
12.	OFFICERS AN	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICER	S AND DIRECTORS IN 12
TITLE	P		1.1 TITLE			Change Addition
NAME	BOWMAN, SUSAN M		1.2 NAME			
STREET ADDRESS	12200 LANDFAIR STREET		1.3 STREET ADDRESS			
CITY-ST-ZIP	SPRING HILL FL			ST-ZIP		· · · · · · · · · · · · · · · · · · ·
TITLE	V	L DEFETE	2.1 1ffLF			Change Addition
NAME	1101101		2.2 NAME			
STREET ADDRESS	516 STAFFORD AVE		2.3 STREET ADDRESS			
CITY-ST-ZIP TITLE	BROOKSVILLE FL			ST-ZIP		Change Addition
NAME	<del>-</del>		3.1 TITLE			Change Addition
STREET ADDRESS	DAVIS, ELIZABETH A 85112 CAMP CASTLE RD		3.2 NAME	ADDRECE		
City-ST-ZIP	BROOKSVILLE FL		3.3 STREET ADDRESS 3.4. CHY-ST-ZIP			
TITLE	DELETE		4.1 TITLE	21-78		Change Addition
NAME			4.2 NAME			Em oversion Em vegition
STREET ADDRESS			43 STREET	ATIONESS		
CITY-ST-ZIP			4.4 CITY-S	1		
TITLE			51 THILE			☐ Change ☐ Addition
NAME			5.2 NAME			-
STREET ADDRESS			5.3 STREET	ADORESS		
CITY-ST-ZIP			5.4 CITY - 9	51 - <b>Z</b> IP		
TITLE		DELETE	6.1 TITLE			Change Addition
NAME	6.2		6.2 NAME			
STREET ADDRESS			6.3 STREET	ADDRESS		
CITY-ST-ZIP			6.4 CITY - 9			
indicated of the officer of the offi	on this annual report or supplementa director of the corporation or the rece	al annual report is true and acc eiver or trustee empowered to	curate and th	at my signatur	Section 119.07(3)(i), Florida Statutes. I fur re shall have the same legal effect as if ma ired by Chapter 607, Florida Statutes; and	ade under nath, that I am an
Block 12	or Block 13 if changed, or on an atta	Aiment with an address.	_ = 100 0000	,	=, =	and my mano appears in