FILE NOW: FILING FEE AFTER MAY 1 IS \$550 00

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT

Sandra B. Mort

Secretary of Ste DIVISION OF CORPO HONS

FILED Apr 30 1997 8:00am Secretary of State

DOCUMENT #	P96000020871	(5)
1. Corporation Name	P9000002007 I	(0)

BONNIE S. BLOCKER, P.A.

Principal Place	of Business	Mailing Address			
7701 38TH CT (SARASOTA FL	E	7701 38TH CT E SARASOTA FL 34243-2856	Ne		
	1 46mg	4	14	3. Date incorporated or Qualified 3a. Date of Last Report 03/04/1996	
	ace of Business	2a. Mailing Address		4. FEI Number Applied For	r
	Westrocklow		MO LAND C		
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.	l i	5. Certificate of Status Desired \$8.75 Additiona	.I
City & State		. City & State		Fee Required	
23 500	isota t	1 28 Sarasota		6. Election Campaign Financing Trust Fund Contribution S5.00 May Be Added to Fees	
24 34 2	Country 25 VS P		30 Co try USA	8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes Yes No	,
		of Current Registered Agent	od 1	10. Name and Address of New Registered Agent	
	CKER, BONNIE S		81 Name		
	38TH CT E		82 Street A	Address (P.O. Box Numbor is Not Acceptable)	
SAR	ASOTA FL 34243		83		
			03		
			84 City	FL 85 Zip Code	
11. Pursuant	to the provisions of Section	ns 607 0502 and 607 1508 Florida Statut	tes the a ove-named r	corporation submits this statement for the purpose of changing its registe	red
office or re	egistered agent, or both, in	n the State of Florida. Such change was a	authorize I by the corp	oration's board of directors. I hereby accept the appointment as registere	id
_	m tamiliar with, and accept	t the obligations of, Section 607.0505, Fig. $\Omega_{\rm col}$	onda Stautes.	4-34-97	
SIGNATURE	Signature, typed or printed name of	registered agent and title if applicable (NOI	t : Registere: Agent signature r	required when reinstating) DATE	-
12.		ICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	DELETE DELETE	1.1 T LE	Change Add	ition
name	BLOCKER, BONNIE S	OL.	1.2 NIME		
STREET ADDRESS	7701 38TH CT E			1340 Westmoretand Dr.	
CITY-ST-ZIP	SARASOTA FL 34243			SACROCHIA FI. 34243	
TITLE		DELETE	2 1 TRLE	Change Add	ומטוזי
NAME			2 2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	2. 4 CITY - S1 - 7/P 3.1 TiTUE	☐ Change ☐ Add	lition
NAME		<u> </u>	3.2 NAME	Onlingt Not	
STREET ADDRESS			3.2 NAME 3.3 STREET ADDRESS		}
CITY-ST-ZIP			3.4. CITY - ST - ZIP		
TITLE		DELFTE	4.1 TITLE	Change Add	lilion
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 C(1)Y - ST - Z(P)		
TITLE		DELETE	5.1 TITLE	Change Add	lition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CHY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE	Change Add	ition
NAME			62 NAME		
STREET ADDRESS			63 STREET ADDRESS		
CITY-ST-ZIP			6 4 CITY - ST - ZIP		

I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 phanged, or on an attachment with an address. BONNie