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Apr 22 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 # P96000021642 (9)

1. Corporation Name
BKW - HC, INC.



Principal Place of Business
360 CENTRAL AVENUE
ST. PETERSBURG FL 33701

Mailing Address
360 CENTRAL AVENUE
ST. PETERSBURG FL 33701-3857

3. Date Incorporated or Qualified
03/08/1996

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

Applied For

21

26

59-3365365

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional
Fees Required

22

27

City & State

City & State

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

23

28

Zip

Country

Zip

Country

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

☒ Yes ☐ No

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DELANO, G K
360 CENTRAL AVENUE
ST. PETERSBURG FL 33701

81 Name

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

83

84 City

FL

85 Zip Code

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, or 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

Signer's typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DC
NAME MENKE, ROBERT M
STREET ADDRESS 360 CENTRAL AVENUE
CITY-ST-ZIP ST. PETERSBURG FL 33701

☐ DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE D, VC
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

☒ Change ☐ Addition

TITLE PD
NAME MEEHAN, DAVID K
STREET ADDRESS 360 CENTRAL AVENUE
CITY-ST-ZIP ST. PETERSBURG FL 33701

☐ DELETE

TITLE TD
NAME HUSSEMAN, EDWIN C
STREET ADDRESS 360 CENTRAL AVENUE
CITY-ST-ZIP ST. PETERSBURG FL 33701

☐ DELETE

3.1 TITLE D, EVP
3.2 NAME Menke, Robert G.
3.3 STREET ADDRESS 360 Central Ave.
3.4 CITY-ST-ZIP St. Petersburg, FL 33701

☐ Change ☐ Addition

TITLE SD
NAME DELANO, G K
STREET ADDRESS 360 CENTRAL AVENUE
CITY-ST-ZIP ST. PETERSBURG FL 33701

☐ DELETE

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE V
NAME KURCAN, STEVEN K
STREET ADDRESS 360 CENTRAL AVENUE
CITY-ST-ZIP ST. PETERSBURG FL 33701

☐ DELETE

5.1 TITLE P
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. 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 changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Kristin Delano 2/17/97 (813) 823-4000x4416

Date

Daytime Phone #

CR2E034 (9/96)