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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P96000037145 (5)

THE BONDSMAN, INC.

Principal Place of Business

Mailing Address

FILED Apr 28 1997 8:00am Secretary of State



3600 S JOHN YOUNG PARKWAY ORLANDO FL 32839		3800 8 JOHN YOUNG PAR ORLANDO FL 32839-8651	3800 S JOHN YOUNG PARKWAY ORLANDO FL 32839-8651				
			·	3. Date Incorp 04/30/19	orated or Qualified 36	3a. Date of Last 4-30-9	
2. Principal Pla	ace of Business	2a, Mailing Address	A 1 1 1 1 1	4. FEI Number		· u	Applied For
<u>عالے ۲</u> ۵		5t, 26 P.O. Box 56	0682	59-5	00/00/		Not Applicable
Suite Apt #		Suite. Apt. #, etc.	·	6. Certificate c	f Status Desired	Fee	Additional Required
City & State	lando, Fl	City & State 28 Orlande		Trust Fund (Adde	0 May Be d to Fees
^{プロ} フ への	Country	A 20 32856	Country 30 USA		ation has tiability for i	ntangible tax under] Yes	s. 199.032,
24 326	9. Name and Address of		30 USH	Florida Stati	Address of New Re		
		Julian riogista rigori	81 Name		^ ^	F	·
	e, James a • S John Young Parkw	·		JAMES	<u>H, C</u>		
	ANDO FL 32839	<u> </u>	82 Street	nddress (P.O. Box Num	Ref is Not Acceptable Ref	t. 5te	ദ
OND	AND I P OFFICE		63				
			84 City .			85 Zi	p Code _
			()clando		- FL 3	2839
11. Pursuant t	a the provisions of Sections 6	07.0502 and 607.1508, Florida Statute State of Florida, Such change was a	es, the above-named	corporation submits thi	s statement for the p	urpose of changing	Its registered
agent Lar	n familiar with, and agoept the	obligations of, Section 607.0505, Flo	rida Statutes.	Oldions Doard of Olle	ciois. Thereby accer	or the appointment	as registered
SIGNATURE	Striplicie, typica or printed name of region	orlo James A. Gred agent and the if applicable (NOTE	: Registered Agent signature	required when reinstating)	······································	7-20-9 DATE	7
12.	OFFICE	RS AND DIRECTORS	13.	ADDITIONS/	CHANGES TO OFFIC		
THILE	D	☐ DEFELE	1.1 TITLE	D ,	0	K Changi	e Addition
NAME	COLE, JAMES A	A PALMALIA VA	1.2 NAME	JAMES H	. Cole	t, Ste B	,
STREET ADDRESS	3800 S JOHN YOUNG P	AHKWAT	1.3 STREET ADDRESS	3023 W.	Fl. 328		
CHY-SI-70P	ORLANDO FL 32839	DELETE	1.4 CITY-SY-ZIP 2.1 TITLE	Orianao,	FI OAG	Change	e Addition
THE		E Decerte	22 NAME			C Cutting	·
NAMI EXECUTACIONES			23 STREET ADDRESS				
STREET ADDRESS			2 4 CITY+ST-ZIP	the second of			
DILE	. 14 1 11. 11. 11. 11. 11. 11. 11. 1	DELETE	3 TITLE			☐ Chang	e
NAME			3.2 NAME	•		**	
STREET ADDRESS			3 3 STREET ADORESS	to the second	en e	•	•
CITY - S1 - 74P			3.4 CITY-ST-ZIP		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
THLE		DELETE	4.1 TITLE			☐ Chang	e 🔲 Addition
NAME:			4. 2 NAME	•			
STREET ADDRESS			4.3 STREET ADDRESS	* 4			
CCTY - ST - 7IP			4.4 CITY - ST - ZIP	**************************************			
THLE		DELETE	5.1 TITLE			☐ Chang	e 🔲 Addition
NAME			5.2 NAME	1.0	e e e e		.
STREET ADDRESS			5.3 STREET ADDRESS			Programme and the second	
CITY - SY - 7IP		Dr. eve	5.4 CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·			a T Additor
THTLE		☐ DELETE	6.1 TITLE			Chang	e L. Addition
NAMé			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
City-St-ZiP	a call that the information	supplied with this filing does not qualif	6.4 CITY-ST-ZIP	tated in Section 110 07	(3)(i) Florida Statute	e I further certify th	nat 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 it 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 13 if changed, or on an attachment with an address.

407-422-2245