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FILED

Apr 29 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 # P96000044786 (7)

1. Corporation Name  
BRADFORD ASSOCIATES, INC.



Principal Place of Business

6145 SUN BLVD UNIT 208B  
ST PETERSBURG FL 33715

Mailing Address

6145 SUN BLVD UNIT 208B  
ST PETERSBURG FL 33715-4168

2. Principal Place of Business

21 560 S. LONGVIEW PL.  
Suite, Apt. #, etc.

22

City & State

23 LONGWOOD, FL

24 32779  
Country

25 SEMINOLE

2a. Mailing Address

26 PO BOX 5541  
Suite, Apt. #, etc.

27

City & State

28 LONGWOOD, FL

29 32791  
Country

30 SEMINOLE

3. Date Incorporated or Qualified

05/20/1996

3a. Date of Last Report

4. FEI Number

59-3392769

Applied For  
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

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

Yes No

9. Name and Address of Current Registered Agent

PETRINO, P D  
6145 SUN BLVD UNIT 208B  
ST PETERSBURG FL 33715

10. Name and Address of New Registered Agent

81 Name THOMAS B. PETRINO

82 Street Address (P.O. Box Number is Not Acceptable)  
560 S. LONGVIEW PL.

83

84 City LONGWOOD

FL

85 Zip Code 32779

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

THOMAS B. PETRINO  
THOMAS B. PETRINO

PROBIDENT

4/22/97

(NOTE: Registered Agent's signature required when re-instating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE NAME STREET ADDRESS CITY - ST - ZIP

12 TITLE NAME STREET ADDRESS CITY - ST - ZIP

13 TITLE NAME STREET ADDRESS CITY - ST - ZIP

14 TITLE NAME STREET ADDRESS CITY - ST - ZIP

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30 TITLE NAME STREET ADDRESS 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)(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.

CR2E034 (9/96)