

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

FILED
May 13 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 # P96000054051 (3)

1. Corporation Name

BAIN VILLAGE REALTY, INC.

Principal Place of Business

1200 WEST RETTA ESPLANADE UNIT 10
PUNTA GORDA FL 33950

Mailing Address

1200 WEST RETTA ESPLANADE UNIT 10
PUNTA GORDA FL 33950-5339



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 06/25/1996		3a. Date of Last Report	
21		26		4. FET Number 65-0680042		Applied For ☐ Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
22		27		6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
City & State		City & State		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No			
23		28					
Zip	Country	Zip	Country				
24	25	29	30				

9. Name and Address of Current Registered Agent

BAIN, WILLIAM E
1200 WEST RETTA ESPLANADE UNIT 10
PUNTA GORDA FL 33950

10. Name and Address of New Registered Agent

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 607.01(2) and 607.15(8), 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 607.05(5), Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title (if applicable)

(NOTE: Registered Agent signature required when retreating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D ☐ DELETE	1.1 TITLE	D ☐ Change ☒ Addition
NAME	BAIN, WILLIAM E	1.2 NAME	Conte, Leonard P.
STREET ADDRESS	3520 BLUE JAY DRIVE	1.3 STREET ADDRESS	1439 Sea Fan Drive
CITY-ST-ZIP	PUNTA GORDA FL 33950	1.4 CITY-ST-ZIP	Punta Gorda, Florida 33950
TITLE	D ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	BAIN, LEONARDA A	2.2 NAME	
STREET ADDRESS	3520 BLUE JAY DRIVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	PUNTA GORDA FL 33950	2.4 CITY-ST-ZIP	
TITLE	D ☒ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	GRIMSHAW, JOHN D	3.2 NAME	
STREET ADDRESS	48 ANNAPOLIS LANE	3.3 STREET ADDRESS	
CITY-ST-ZIP	ROTONDA WEST FL 33847	3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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

SIGNATURE: *William E. Bain* 4/28/97 941-637-1381

CR2E034 (9/96)