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

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name P96000067529 (3)

## **FILED** Feb 27 1998 8:00am Secretary of State

BILLINGSLEY INDUSTRIAL CORPORATION					
Principal Place of Business Mailing Address				1 109/100) 110 IDIID BIIII 20111 DBIII 89/11 XBIII	EINLI TERREL BLICK ILBIN TREE TRAE
100 CORAL WAY EAST STE 9 100 CORAL WAY EAST ST INDIALANTIC FL 32803 INDIALANTIC FL 32803					
-				DO NOT WRITE IN TH	IS SPACE
				3. Date Incorporated or Qualified 08/12/1996	
2. Principal Place	of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-3396518	Not Applicable
Suite, Apt. #, et	c.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		g. Continuate of challes besided	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	Zip	Country	Trust Fund Contribution	Added to Fees
24	25		30	<ol> <li>This corporation owes or has paid the entering the Personal Property Tax due June 30.</li> </ol>	current year Intangible
	Name and Address of Current	29  Registered Agent	]30]	10. Name and Address of New Registere	
	GSLEY, DAVID A		81 Name		
100 CORAL WAY EAST STE 9			OD Chron Add	/D C. Boy Number is Not Assentable)	<del></del>
INDIALANTIC FL 32903			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
			83		
			84 City		les Zio Codo
			City	F	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					
Signat	turn, typod or printed name of registered agent	and title if applicable. (NO	TE: Registered Agent signature requi	red when reinstating) DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	
· · · · · · · · · · · · · · · · · · ·	DELENIONEN DAVIDA	DELETE	1.1 TITLE		Change Addition
	BILLINGSLEY, DAVID A	•	1.2 NAME		
	100 CORAL WAY EAST STE 9 NDIALANTIC FL 32903		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	INDIADATIC PE 32803	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition
NAME		C Dittell	2.2 NAME		C change C Novicon
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2.4 CITY-ST-ZIP		
TITLE	······································	DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		. —
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			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	· <del></del> ·	Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-\$1-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		L Change L Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
City-St-ZiP	that the information avention with	this filing does not qualify.	6.4 CITY-ST-ZIP	Section 119.07(3)(i). Florida Statutes, I further	portify 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 ampowered 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.