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

CORPORÁTION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P96000082976 (7) DOCUMENT #

BRANTLEY-KNEPPER DEVELOPMENT, INC.



38 JAN 20 AM 8: 25

SECRETARY OF STATE TALLAHASSEE, FLORIDA



rincipal riac	e or business	Walling A	Mailing Address							
4545 BOHEMIA PLACE PENSACOLA FL 32514-8559		P.O. DRAWER 15430 PENSACOLA FL 32514-0430					DO NOT WRITE IN THIS	SPACE		
							3. Date Incorporated or Qualified			
							10/02/1996			
2. Principal P	lace of Business	2a. Mailin	n Address			·	4. FEI Number 59 - 341049		pplied For	
_		26	9				APPLIED FOR-		ot Applicable	
Suite, Apt.	# elc		Apt. #, etc.						Additional	
	π, φιο.		27				5. Certificate of Status Desired	,	egulred	
22 City & State	9		City & State				6. Election Campaign Financing			
		´	28				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution			
Zip	Country	Zip		Cou	intry		8. This corporation owes or has paid the cur			
	25	29		30			· · · · · · · · · · · · · · · · · · ·	Yes 1	tanalible	
24	9. Name and Address of Curro		gent	301			10. Name and Address of New Registered			
MO	ORHEAD, STEPHEN R	one riogistorous r		· · · · · · · · · · · · · · · · · · ·	81	Name				
	O BAYOU BOULEVARD #12 &	#13	82 Street			Street Ad	Address (P.O. Box Number is Not Acceptable)			
PEI	NSACOLA FL 32503									
					83					
					84	City		85 Zip	Code	
						_	<u> </u>	.		
11. Pursuant	to the provisions of Sections 607.05	502 and 607.1508	3, Florida Statut	os, the al	pove	-named co	orporation submits this statement for the purpose o ration's board of directors. I hereby accept the app	f changing i	ts registered	
agent. La	m familiar with, and accept the obli	igations of, Section	on 607.0505, Flo	orida Stat	u by	the corpor 3.	ration's board of offectors. Thereby accept the app.	wininent as	registered	
SIGNATURE										
OIGHNIOILE	Signature, typod or printed name of registered a	gent and title if applicat	ie. (NOTI	L Rogistere	d Age	nt signature req	quired when reinstating) DATE			
12.	OFFICERS A	ND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFICERS AND			
TITLE	D D LLIEU D D LLIEU D D		☐ DELĒTE	1.1 TO	TLE		SEC RETARY	Change	Addition	
NAME	BRANTLEY, DONALD S			1.2 N/	AME					
STREET ADDRESS	4161 MADURA ROAD			1.3 \$1	REET.	ADDRESS	DIRECTOR			
CITY-ST-ZIP	GULF BREEZE FL 32561			1.4 CI	TY-SI	r-zip				
TITLE	PD		DELETE	2.1 10	TLE		0050,050	☐ Change	Addition	
NAME	knepper, randolph l			2.2 N/	AME		(Masiner)			
STREET ADDRESS	4545 BOHEMIA PLACE			2.3 \$1	REE1	ADDRESS	PRESIDENT DIRECTOR			
CITY-ST-ZIP	PENSACOLA FL 32504-8559)		2.40	ITY-S	ST-ZIP	VICECION			
TITLE			DELETE	3.1 TI				Change	☐ Addition	
NAME.				32 N	AME		ے پیچھے کے کہا انسانے پیشین پیشین پیشین کے			
STREET ADDRESS				1		ADDRESS	100002410; -01/23/980	341		
CITY-ST-ZIP						ST-ZIP	-01/23/380	11211	104	
TITLE			DELETE	4.1 10		1-211	****150.00	***	Addition	
NAME				4. 2 N						
						ADDRESS				
STREET ADDRESS										
CITY-ST-ZIP			DELETE	4.4 CI		1 - 7IP		Change	Addition	
TITLE			☐ Detete	5.1 10				Change	Addition	
NAME				5.2 NA			$()$ $(1/M_H)$			
STREET ADDRESS						address	II.uu			
CITY-ST-ZIP			DEL TOTAL	5.4 CI		í - ZIP	0. Waw Jan 20,19	E RL	··· / / / / / / / / / / / / / / / / / /	
TRILE			DELETE	6.1 TI	TLE		104 11 10	HIXChange	Addition	
NAME				6.2 NA	AME		$\bigcup un_{i} \bigcup v_{i} \cup v$	i		
STREET ADDRESS				6.3 S1	REET	ADORESS	,			
						I .				

14. 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.