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

CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000083133 (4)

BECHTOLD CORPORATION

Principal Place of Business	Mailing Address
8133 REGENTS COURT UNIVERSITY PARK FL 34201	8133 REGENTS COURT UNIVERSITY PARK FL 34201-2234
2 Principal Place of Business	2a. Mailing Address

FILED Apr 25 1997 8:00am Secretary of State



UNIVERSITY PA		UNIVERSITY PARK FL 34201	-2234		
				3. Date Incorporated or Qualified 10/09/1996	Sa. Date of Last Report
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-070160	Not Applicable
Suite, Apt	#, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & State	C	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for i	
24	25	29	30		Yes No
	9. Name and Address of Curr		==	10. Name and Address of New Re	gistered Agent
SKIP	PER, J. RONALD		81 Name		
	RINGLING BLVD.		62 Street A	ddress (P.O. Box Number is Not Acceptab	Jo)
	E 1000		BZ STEEL A	daress (P.O. Box Number is Not Acceptate	18)
	ASOTA FL 34238		83		
SAIL	4301A FE 34230				
			84 City		FL 85 Zip Code
11 Discussion	to the previous of Sections 607.0	502 and 607 1508 Florida Statute	s the above-named o	orporation submits this statement for the p	
office or r	egistered agent, or both, in the Sta	ite of Florida. Such change was a	uthorized by the corpo	orporation submits this statement for the poration's board of directors. I hereby accep	ot the appointment as registered
agent. La	m familiar with, and accept the obl	igations of, Section 607.0505, Flor	rida Statutes.		
SIGNATURE					
	Signature, typed or prelied name of registered a		Registered Agent signature re	equired when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE PERS AND DIRECTORS IN 12
12.	D OFFICERS A	ND DIRECTORS DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFIC	Change Addition
}itu#	_	□ beceie			C) onlings C Modition
NAME	BECHTOLD, RICHARD A		1.2 NAME		
STREET ACORESS	8133 REGENTS COURT		13 STREET ADDRESS		
CHTY-\$1-ZFP	UNIVERSITY PARK FL 34201		1.4 CITY-ST-ZIP		
TITLE	D	DELETE	2 1 TITLE		Change Addition
NAME	BECHTOLD, MARGARET A		2.2 NAME		
STREET ADDRESS	8133 REGENTS COURT		2.3 STREET ADDRESS		
CITY - S1 - ZIF	UNIVERSITY PARK FL 34201		2.4 CITY-ST-ZIP		
TOLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY - ST - 7/P			3.4. CITY-ST-ZIP		
TILE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
			4.3 STREET ADDRESS		
STHEET ADDRESS			4.4 CITY-ST-ZIP		'
CITY-ST-ZIP		DELETE	5.1 TITLE		Change Addition
THLE		E. DECLIE			house a constant
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
City - ST - Ziff			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME .			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
0.12 62 300			6.4 CITY ST - ZID		

14. I do hereby certify that the information supplied with this filling 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 of 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 conformation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name I am an officer or director of the cappears in Block 12 or Block 13 in

SIGNATURE: