Apr 12, 1999 8:00 am Secretary of State

04-12-1999 90003 047 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000072405

1. Corporation Name

B&M OSBORNE, INC.

Principal Place	of Business	Mailing Address					, 16818 11811 81811	49191 9111 1881
1520 ROYAL PALM SQUARE BLVD		1520 ROYAL PALM SOUARE BLVD						
SUITE 240		SUITE 240 FT MYERS FL 33919				DO NOT WRITE IN THIS SPACE		
FT MYERS FL 33919 US		US				3. Date Incorporated or Qualifed		
-						08/19/1997		
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number	A	pplied For
21		26			<u> </u>	59-3462901		ot Applicable
Suite, Apt.	#, etc. 11 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Suite, Apt. #, etc:		:	t	5. Certificate of Status Desired		Additional equired
22	· · · · · · · · · · · · · · · · · · ·	City & State				A Station Constitution		
City & State	9	City & State				6. Election Campaign Financing Trust Fund Contribution		May Be to Fees
Z ip	Country	Zip	Cou	ntry		8. This corporation owes the current year I		
24	25	29	30	•		Personal Property Tax.	☐ Yes	□No
	9. Name and Address of Current	t Registered Agent				10. Name and Address of New Registere	d Agent	
				81	Name			ļ
	ORNE, BYRD			82	Street Addre	ess (P.O. Box Number is Not Acceptable)		
	O NIGHT HERON DR.							
NAPI	LES FL 34119			83				}
				84	City	F	85 Zip	Code
agent. I ai	m familiar with, and accept the obligat	tions of, Section 607.0505, Flor	ida Statı	utes.		n's board of directors. I hereby accept the app		
	Signature, typed or printed name of registered agent		Registered		signature required	when reinstating) DATE ADDITIONS CHANGES TO DESIGES A	ND DIRECT	ORS IN 12
12.	OFFICERS AN	D DIRECTORS	Registered	Agent s	signature required	when reinstating) ADDITIONS/CHANGES TO OFFICERS A	AND DIRECT	
12.	OFFICERS ANI		Registered 13.	Agent s	signature required	THE TOTAL CONTROL OF THE TOTAL		
12. TITLE NAME	OFFICERS AND OSBORNE, BYRD	D DIRECTORS	13.	Agent s		THE TOTAL CONTROL OF THE TOTAL		
12. TITLE NAME STREET ADDRESS	OFFICERS AND OSBORNE, BYRD 11770 NIGHT HERON DR.	D DIRECTORS	13. 1.1 TII 1.2 N/ 1.3 ST	Agent s	DDRESS	THE TOTAL CONTROL OF THE TOTAL		
12. TITLE NAME	OFFICERS AND OSBORNE, BYRD	D DIRECTORS	13. 1.1 TII 1.2 N/ 1.3 ST	Agent s TLE AME REET A	DDRESS	THE TOTAL CONTROL OF THE TOTAL		☐ Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND OSBORNE, BYRD 11770 NIGHT HERON DR.	D DIRECTORS	13. 1.1 TII 1.2 NA 1.3 ST 1.4 CI	Agent s TLE AME REET AI TY-ST-2	DDRESS	THE TOTAL CONTROL OF THE TOTAL	Change	☐ Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AND OSBORNE, BYRD 11770 NIGHT HERON DR.	D DIRECTORS	13. 1.1 TII 1.2 N/4 1.3 ST 1.4 CT 2.1 TI 2.2 N/4	Agent s TLE AME REET AI TY-ST-2 TLE	DDRESS	THE TOTAL CONTROL OF THE TOTAL	Change	☐ Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AND OSBORNE, BYRD 11770 NIGHT HERON DR.	D DIRECTORS DELETE DELETE	Registered 13. 1.1 TII 1.2 NA 1.3 ST 1.4 CT 2.1 TI 2.2 NA 2.3 ST 2.4 C	Agent's TLE TREET AI TY-ST-; TLE TREET AI TREET AI TREET AI	DDRESS ZIP	THE TOTAL CONTROL OF THE TOTAL	Change	☐ Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME _STREET ADDRESS	OFFICERS AND OSBORNE, BYRD 11770 NIGHT HERON DR.	D DIRECTORS	13. 1.1 TII 1.2 NA 1.3 ST 1.4 CT 2.1 TI 2.2 NA 2.3 ST 2.4 C 3.1 TI	Agent's TLE TY-ST-7 TLE TREET A	DDRESS ZIP	THE TOTAL CONTROL OF THE TOTAL	Change	☐ Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME _STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	OFFICERS AND OSBORNE, BYRD 11770 NIGHT HERON DR.	D DIRECTORS DELETE DELETE	13. 1.1 TII 1.2 NA 1.3 ST 1.4 CC 2.1 TI 2.2 NA 2.3 ST 2.4 C 3.1 TI 3.2 NA	Agent's TLE AME TY-ST-7 TLE AME TY-ST-7 TLE TTLE TTLE TTLE	ODRESS ZIP ODRESS	THE TOTAL CONTROL OF THE TOTAL	Change	☐ Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME _STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AND OSBORNE, BYRD 11770 NIGHT HERON DR.	D DIRECTORS DELETE DELETE	13. 1.1 TII 1.2 NA 1.3 ST 1.4 CC 2.1 TT 2.2 NA 2.3 ST 2.4 C 3.1 TT 3.2 NA 3.3 ST	Agent's TLE TY-ST-1 TLE TREET A TTY-ST-1 TLE TREET A TTY-ST-1 TLE TREET A	NODRESS ZIP NODRESSZIP	THE TOTAL CONTROL OF THE TOTAL	Change	☐ Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME _STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP COMMANDE STREET ADDRESS CITY-ST-ZIP	OFFICERS AND OSBORNE, BYRD 11770 NIGHT HERON DR.	D DIRECTORS DELETE DELETE	13. 1.1 TII 1.2 NA 1.3 ST 1.4 CC 2.1 TT 2.2 NA 2.3 ST 2.4 C 3.1 TT 3.2 NA 3.3 ST	Agent's TLE REET AI TY-ST-7 TLE MME REET A ITY-ST- TLE AME REET A REET A REET A	NODRESS ZIP NODRESSZIP	THE TOTAL CONTROL OF THE TOTAL	Change	Addition Addition Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME _STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AND OSBORNE, BYRD 11770 NIGHT HERON DR.	D DIRECTORS DELETE DELETE	13. 1.1 TII 1.2 NA 1.3 ST 1.4 CC 2.1 TI 2.2 NA 2.3 ST 2.4 C 3.1 TI 3.2 NA 3.3 ST 3.4 C	Agent's TLE MME TY-ST-1 TLE MME TY-ST-1 TLE MME TY-ST-1 TLE MME TY-ST-1 TLE TY-ST-1 TLE TY-ST-1 TLE TY-ST-1 TLE TY-ST-1 TLE	NODRESS ZIP NODRESSZIP	THE TOTAL CONTROL OF THE TOTAL	☐ Change	Addition Addition Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME _STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AND OSBORNE, BYRD 11770 NIGHT HERON DR.	D DIRECTORS DELETE DELETE	13. 1.1 TII 1.2 NA 1.3 ST 1.4 CT 2.1 TI 2.2 NA 2.3 ST 2.4 C 3.1 TT 3.2 NA 3.3 ST 3.4 . C 4.1 TT 4.2 N	Agent's TLE TREET A TY-ST-ILE TREET A TY-ST-ILE TREET A TRE	NODRESS ZIP NODRESSZIP	THE TOTAL CONTROL OF THE TOTAL	☐ Change	Addition Addition Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME _STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AND OSBORNE, BYRD 11770 NIGHT HERON DR.	D DIRECTORS DELETE DELETE	13. 1.1 TII 1.2 NA 1.3 ST 1.4 CC 2.1 TI 2.2 NA 2.3 ST 2.4 C 3.1 TI 3.2 NA 3.3 ST 3.4 .C 4.1 TI 4.2 NA 4.3 ST	Agent's TLE TREET A TY-ST-ILE TREET A TY-ST-ILE TREET A TRE	JODRESS ZIP JODRESS JODRESS JODRESS JODRESS JODRESS	THE TOTAL CONTROL OF THE TOTAL	☐ Change	Addition Addition Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME _STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AND OSBORNE, BYRD 11770 NIGHT HERON DR.	D DIRECTORS DELETE DELETE	13. 1.1 TII 1.2 NA 1.3 ST 1.4 CC 2.1 TI 2.2 NA 2.3 ST 2.4 C 3.1 TI 3.2 NA 3.3 ST 3.4 .C 4.1 TI 4.2 NA 4.3 ST	Agent s ILE REET AI TY-ST-1 ILE ME ITY-ST-1 ILE AME ITY-ST- ILE AME	JODRESS ZIP JODRESS JODRESS JODRESS JODRESS JODRESS	THE TOTAL CONTROL OF THE TOTAL	☐ Change	Addition Addition Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME _STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND OSBORNE, BYRD 11770 NIGHT HERON DR.	D DIRECTORS DELETE DELETE DELETE	13. 1.1 TII 1.2 NA 1.3 ST 1.4 CC 2.1 TI 2.2 NA 2.3 ST 2.4 C 3.1 TI 3.2 NA 3.3 ST 3.4 .C 4.1 TI 4.2 N 4.3 ST 4.4 CI 5.1 TI 5.2 NA	Agent s TLE TLE TLE TLE TLE TLE TLE TL	ADDRESS ADDRESS ADDRESS ADDRESS ZIP	THE TOTAL CONTROL OF THE TOTAL	☐ Change ☐ Change ☐ Change	Addition Addition Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AND OSBORNE, BYRD 11770 NIGHT HERON DR.	D DIRECTORS DELETE DELETE DELETE	13. 1.1 TII 1.2 NA 1.3 ST 1.4 CC 2.1 TI 2.2 NA 2.3 ST 2.4 C 3.1 TI 3.2 NA 3.3 ST 3.4 . C 4.1 TI 4. 2 N 4.3 ST 4.4 CI 5.1 TI 5.2 NA 5.3 ST	Agent s TLE ME TREET A TY-ST-1 TLE THE THE THE THE THE THE THE	ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ZIP	THE TOTAL CONTROL OF THE TOTAL	☐ Change ☐ Change ☐ Change	Addition Addition Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME _STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AND OSBORNE, BYRD 11770 NIGHT HERON DR.	D DIRECTORS DELETE DELETE DELETE	13. 1.1 TII 1.2 NA 1.3 ST 1.4 CC 2.1 TI 2.2 NA 2.3 ST 2.4 C 3.1 TI 3.2 NA 3.3 ST 3.4 . C 4.1 TI 4. 2 N 4.3 ST 4.4 CI 5.1 TI 5.2 NA 5.3 ST	Agent s TLE ME TREET A TLE TLE TLE TLE TLE TLE TLE TL	ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ZIP	THE TOTAL CONTROL OF THE TOTAL	☐ Change ☐ Change ☐ Change	Addition Addition Addition Addition

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADORESS

CITY-ST-ZIP

SIGNING OFFICER OR DIRECTOR

14. I 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 changes or on an attachment with an address, with all other like empowered. 931-0171