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

PROFIT CORPORATION **ANNUAL REPORT** 

1998

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

P97000073936 (1) DOCUMENT #

B & H MANAGEMENT OF TALLAHASSEE, INC.

Principal Place of Business Mailing Address 2539 W TENNESSEE ST 2539 W TENNESSEE ST TALLAHASSEE FL 32304 TALLAHASSEE FL 32304 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/26/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 29 Personal Property Tax due June 30. Yes 24 25 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent HOUSE, JOHNNIE JR 2539 W TENNESSEE ST 62 Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL 32304 83 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 Signature, typed or pointed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstaling) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE Change \_\_ Addition BEAUMONT, VICKI NAME 1.2 NAME 2539 W TENNESSEE ST STREET ADDRESS 1.3 STREET ADDRESS TALLAHASSEE FL 32304 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE TITLE 2.1 TITLE Change Addition HOUSE, JOHNNIE 2.2 NAME 2539 W TENNESSEE ST STREET ADDRESS 2.3 STREET ADDRESS TALLAHASSEE FL 32304 CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Change Addition TITLE 31 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change \_\_\_ Addition TITLE 4.1 TITLE 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 C(TY - ST - ZIP CITY-ST-ZIP DELETE ☐ Change Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 City-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this annual report or suppliemental 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 op an attack ment with an address. שיבות נונות

**FILED** 

May 08 1998 8:00am

Secretary of State