

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

FILED
Jun 17 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000083036
1. Corporation Name

Bostwick Investments, Inc.

Principal Place of Business	Mailing Address
PO Box 584 Bostwick, FL 32007	PO Box 584 Bostwick, FL 32007

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	4. FEI Number	Applied For
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	9-24-97	59-3470433	Not Applicable
22 City & State	27 City & State	5. Certificate of Status Desired	6. Election Campaign Financing	8. This corporation owes or has paid the current year Intangible
23 Zip	28 Zip	<input type="checkbox"/> \$8.75 Additional Fee Required	Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
24 Country	29 Country	30		

9. Name and Address of Current Registered Agent

Jerry E Klemm Jr.
145 Cazzie Dr.
Bostwick, FL 32007

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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 printed name of registered agent and block applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
D Klemm, Jerry E Jr	145 CAZZIE LN.	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS	Bostwick, FL 32007	1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	NAME	2.1 TITLE	2.2 NAME
D Yoxtheimer, Paul	287 PALMETTO BLUFF	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS	Bostwick, FL 32007	2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	NAME	3.1 TITLE	3.2 NAME
D Parrish, Wallace	134 SILVER LAKE TERR.	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS	Bostwick, FL 32007	3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	NAME	4.1 TITLE	4.2 NAME
D Williams, John M	118 TAYLOR RD.	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS	Bostwick, FL 32007	4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	NAME	5.1 TITLE	5.2 NAME
D Bragg, John	284 ALMENDRO BLUFF	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS	Bostwick, FL 32007	5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	NAME	6.1 TITLE	6.2 NAME
		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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)(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.

CR2E034 (10/97)