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 # P98000091207

1. Corporation Name

BEDNAR TRUCKING COMPANY, INC.

Principal Place of Business
6439 WOODSMAN DR ZEPHYRHILLS FL 33544

Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90116 038 ***150.00

Principal Place	e of Business	Mailing Address				i ittiisti iis isisi isii san	*****		*****
6439 WOODSMA	AN DR	6439 WOODSMAN DR							
ZEPHYRHILLS FL 33544 ZEPHYRHILLS FL 33544									
							RITE IN THIS	SPACE	
						ate Incorporated or Qualife 0/26/1998	•a		
2. Principal Pl	lace of Business	2a. Mailing Address		•	4. FI	El Number	_		plied For
21		26			<u> </u>	19-3549075			t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5.0	ertifcate of Status Desired		\$8.75	I
22		27			J			Fee Re	
City & State	e	City & State				lection Campaign Financin	g _□ .	\$5.00	
23		28				rust Fund Contribution		Added 1	o Fees
Zip	Country	Zip	_ Country	/	•	his corporation owes the co	urrent year Inta	_	DMNo
24	25		0			ersonal Property Tax.	. Dowletowed	L Yes	LAINO
	9. Name and Address of Current	t Registered Agent	81	Mana	10. N	ame and Address of Nev	v Registered /	Agent	
BEDI	NAR, JOSEPH JR		81	Name					
	WOODSMAN DR		82	Street	Address (P.O	. Box Number is Not Acce	ptable)		
	HYRHILLS FL 33544								
ZEPT	TINNILLS PL 33344		83	1					
			84	City				85 Zip (Code
				1			FL		
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	of Florida. Such change was aut	, the abov horized by	e-named the corp	corporation s oration's boar	ubmits this statement for t d of directors. I hereby acc	ne purpose of cept the appoir	changing its ntment as re	registered gistered
agent. I a	m familiar with, and accept the obligat	tions of, Section 607.0505, Florid	ia Statutes	S.					,
agent. I at SIGNATURE	m familiar with, and accept the obligat	tions of, Section 607.0505, Florid	ia Statutes	S.		-1-1-1	DATE		
agent. I a	m familiar with, and accept the obligat Signature, typed or printed name of registered agen	it and title if applicable. (NOTE: F	la Statutes	S.	required when reins		DATE	ID DIRECTO	DRS IN 12
agent. I at SIGNATURE	m familiar with, and accept the obligat Signature, typed or printed name of registered agent OFFICERS AN	tions of, Section 607.0505, Florid it and title if applicable. (NOTE: R D DIRECTORS	tegistered Age	S.	required when reins	DITIONS/CHANGES TO	OFFICERS AN	ID DIRECTO	DRS IN 12
agent. I at SIGNATURE 12. TITLE	m familiar with, and accept the obligat Signature, typed or printed name of registered aperi OFFICERS AN	it and title if applicable. (NOTE: F	tegistered Age 13. 1.1 TITLE	S, ent signature i	required when reins	DITIONS/CHANGES TO	OFFICERS AN		
agent. I at SIGNATURE 12. TITLE NAME	Signature, typed or printed name of registered agent OFFICERS AN DIPPITE AND BEDNAR, JOSPEH JR	tions of, Section 607.0505, Florid it and title if applicable. (NOTE: R D DIRECTORS	tegistered Age 13. 1.1 TITLE 1.2 NAME	S, ent signature i	AD REITH 2503	R. BEDNAM MOBILAIRE D	DFFICERS AN		
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered agent OFFICERS AN DIP / T/C BEDNAR, JOSPEH JR 6439 WOODSMAN DR	tions of, Section 607.0505, Florid it and title if applicable. (NOTE: R D DIRECTORS	tegristered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE	s. Int signature i	AD REITH 2503	R. BEDNAM MOBILAIRE D	DFFICERS AN		
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered agent OFFICERS AN DIP / T/C BEDNAR, JOSPEH JR 6439 WOODSMAN DR ZEPHYRHILLS FL 33544	tions of, Section 607.0505, Florid it and title if applicable. (NOTE: F D DIRECTORS DELETE	tagistered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE	s. Int signature i	AD REITH 2503	DITIONS/CHANGES TO	DFFICERS AN		
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered agent OFFICERS ANI D/P/T/C BEDNAR, JOSPEH JR 6439 WOODSMAN DR ZEPHYRHILLS FL 33544 D/V/T	tions of, Section 607.0505, Florid it and title if applicable. (NOTE: R D DIRECTORS	tegistered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE	s. Int signature i T ADDRESS ST-ZIP	AD REITH 2503	R. BEDNAM MOBILAIRE D	DFFICERS AN	☐ Change	Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered agent OFFICERS ANI D/P/T/C BEDNAR, JOSPEH JR 6439 WOODSMAN DR ZEPHYRHILLS FL 33544 D/V/T BEDNAR, THERESA	tions of, Section 607.0505, Florid it and title if applicable. (NOTE: F D DIRECTORS DELETE	tegistered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-5 2.1 TITLE 2.2 NAME	s. int signature i int signatu	AD REITH 2503	R. BEDNAM MOBILAIRE D	DFFICERS AN	☐ Change	Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered agent OFFICERS ANI D/P/T/C BEDNAR, JOSPEH JR 6439 WOODSMAN DR ZEPHYRHILLS FL 33544 D/V/T BEDNAR, THERESA 6439 WOODSMAN DR	tions of, Section 607.0505, Florid it and title if applicable. (NOTE: F D DIRECTORS DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE	s. TADDRESS TADDRESS	AD REITH 2503	R. BEDNAM MOBILAIRE D	DFFICERS AN	☐ Change	Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered agent OFFICERS ANI DIP / T/C BEDNAR, JOSPEH JR 6439 WOODSMAN DR ZEPHYRHILLS FL 33544 D/V/T BEDNAR, THERESA 6439 WOODSMAN DR ZEPHYRHILLS FL 33544	tions of, Section 607.0505, Florid it and title if applicable. (NOTE: F D DIRECTORS DELETE DELETE	tegistered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-	s. TADDRESS TADDRESS	AD REITH 2503	R. BEDNAM MOBILAIRE D	DFFICERS AN	☐ Change☐ Change☐ .	Maddition ☐ Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered agent OFFICERS ANI DIP / T/C BEDNAR, JOSPEH JR 6439 WOODSMAN DR ZEPHYRHILLS FL 33544 D/V/T BEDNAR, THERESA 6439 WOODSMAN DR ZEPHYRHILLS FL 33544 D/S/M	tions of, Section 607.0505, Florid it and title if applicable. (NOTE: F D DIRECTORS DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 2.4 CITY-3.1 TITLE 2.3 STREE 2.4 CITY-3.1 TITLE 3.1 T	S. Int signature in signature i	AD REITH 2503	R. BEDNAM MOBILAIRE D	DFFICERS AN	☐ Change	Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered agent OFFICERS ANI DIP / T/C BEDNAR, JOSPEH JR 6439 WOODSMAN DR ZEPHYRHILLS FL 33544 D/V/T BEDNAR, THERESA 6439 WOODSMAN DR ZEPHYRHILLS FL 33544 D/S/M BEDNAR, CHARLOTTE	tions of, Section 607.0505, Florid it and title if applicable. (NOTE: F D DIRECTORS DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREEE 1.4 CITY-5 2.1 TITLE 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME	s. TADDRESS ST-ZIP TADDRESS ST-ZIP	AD REITH 2503	R. BEDNAM MOBILAIRE D	DFFICERS AN	☐ Change☐ Change☐ .	Maddition ☐ Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered agent OFFICERS ANI DIP / T/C BEDNAR, JOSPEH JR 6439 WOODSMAN DR ZEPHYRHILLS FL 33544 D/V/T BEDNAR, THERESA 6439 WOODSMAN DR ZEPHYRHILLS FL 33544 D/S/M BEDNAR, CHARLOTTE 6439 WOODSMAN DR	tions of, Section 607.0505, Florid it and title if applicable. (NOTE: F D DIRECTORS DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE	ent signature i ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	AD REITH 2503	R. BEDNAM MOBILAIRE D	DFFICERS AN	☐ Change☐ Change☐ .	Maddition ☐ Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	m familiar with, and accept the obligate Signature, typed or printed name of registered agent OFFICERS AN DIPLOTE BEDNAR, JOSPEH JR 6439 WOODSMAN DR ZEPHYRHILLS FL 33544 DIVIT BEDNAR, THERESA 6439 WOODSMAN DR ZEPHYRHILLS FL 33544 DISTINATION DIPLOTE 6439 WOODSMAN DR ZEPHYRHILLS FL 33544 DISTINATION DIPLOTE 6439 WOODSMAN DR ZEPHYRHILLS FL 33544	it and title if applicable. (NOTE: F D DIRECTORS DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY- 3.4 CITY- 3.4 CITY- 3.4 CITY- 3.7 TITLE	ent signature i ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	AD REITH 2503	R. BEDNAM MOBILAIRE D	DFFICERS AN	☐ Change ☐ Change ☐ Change	Addition Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	m familiar with, and accept the obligate Signature, typed or printed name of registered agent OFFICERS AN DIPLOTE BEDNAR, JOSPEH JR 6439 WOODSMAN DR ZEPHYRHILLS FL 33544 D/V/T BEDNAR, THERESA 6439 WOODSMAN DR ZEPHYRHILLS FL 33544 D/S/M BEDNAR, CHARLOTTE 6439 WOODSMAN DR ZEPHYRHILLS FL 33544 D/S/M BEDNAR, CHARLOTTE 6439 WOODSMAN DR ZEPHYRHILLS FL 33544 D	tions of, Section 607.0505, Florid it and title if applicable. (NOTE: F D DIRECTORS DELETE DELETE	13. 1.1 TITLE 12 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY- 4.1 TITLE	T ADDRESS	AD REITH 2503	R. BEDNAM MOBILAIRE D	DFFICERS AN	☐ Change☐ Change☐ .	Maddition ☐ Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	M familiar with, and accept the obligate Signature, typed or printed name of registered agent OFFICERS AN DIPLOTE BEDNAR, JOSPEH JR 6439 WOODSMAN DR ZEPHYRHILLS FL 33544 D/V/T BEDNAR, THERESA 6439 WOODSMAN DR ZEPHYRHILLS FL 33544 D/S/M BEDNAR, CHARLOTTE 6439 WOODSMAN DR ZEPHYRHILLS FL 33544 D/S/M BEDNAR, CHARLOTTE 6439 WOODSMAN DR ZEPHYRHILLS FL 33544 D BEDNAR, ERIC	it and title if applicable. (NOTE: F D DIRECTORS DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY- 4.1 TITLE 4.2 NAME	ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	D KEITH 2503 Lutz	R. BEDNAM MOBILAIRE D	DFFICERS AN	☐ Change ☐ Change ☐ Change	Addition Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered agent OFFICERS AN DIPLY CBEDNAR, JOSPEH JR 6439 WOODSMAN DR ZEPHYRHILLS FL 33544 D/V/T BEDNAR, THERESA 6439 WOODSMAN DR ZEPHYRHILLS FL 33544 D/S/M BEDNAR, CHARLOTTE 6439 WOODSMAN DR ZEPHYRHILLS FL 33544 D/S/M BEDNAR, CHARLOTTE 6439 WOODSMAN DR ZEPHYRHILLS FL 33544 D BEDNAR, ERIC 6439 WOODSMAN DR	it and title if applicable. (NOTE: F D DIRECTORS DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY- 4.1 TITLE 4.2 NAME 4.3 STREE 4.3 STREE 4.3 STREE	ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	D KEITH 2503 Lutz	R. BEDNAM MOBILAIRE D	DFFICERS AN	☐ Change ☐ Change ☐ Change	Addition Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered agening of FICERS AND DIP / T/C BEDNAR, JOSPEH JR 6439 WOODSMAN DR ZEPHYRHILLS FL 33544 D/V/T BEDNAR, THERESA 6439 WOODSMAN DR ZEPHYRHILLS FL 33544 D/S/M BEDNAR, CHARLOTTE 6439 WOODSMAN DR ZEPHYRHILLS FL 33544 D BEDNAR, CHARLOTTE 6439 WOODSMAN DR ZEPHYRHILLS FL 33544 D BEDNAR, ERIC 6439 WOODSMAN DR ZEPHYRHILLS FL 33544	it and title if applicable. (NOTE: F D DIRECTORS DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY- 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY- 4.3 STREE 4.4 CITY- 4.1 STREE	ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	D KEITH 2503 Lutz	R. BEDNAM MOBILAIRE D	DFFICERS AN	☐ Change ☐ Change ☐ Change	Addition Addition Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE TITLE TITLE TITLE	Signature, typed or printed name of registered agent OFFICERS AN DIPLOMENT OFFICERS AN DIPLOMENT OFFICERS AN DIPLOMENT OFFICERS AN OFFICERS AN OFFICERS AN OFFICERS AN OFFICERS AN OFFICERS OFFI	it and title if applicable. (NOTE: F D DIRECTORS DELETE DELETE	13. 1.1 TITLE 12 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY- 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY- 5.1 TITLE 5.1 TITLE 5.1 TITLE 5.1 TITLE 5.1 TITLE	ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	D KEITH 2503 Lutz	R. BEDNAM MOBILAIRE D	DFFICERS AN	☐ Change ☐ Change ☐ Change	Addition Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	M familiar with, and accept the obligate Signature, typed or printed name of registered agent OFFICERS AN DIP / T/C BEDNAR, JOSPEH JR 6439 WOODSMAN DR ZEPHYRHILLS FL 33544 D/V/T BEDNAR, THERESA 6439 WOODSMAN DR ZEPHYRHILLS FL 33544 D/S/M BEDNAR, CHARLOTTE 6439 WOODSMAN DR ZEPHYRHILLS FL 33544 D BEDNAR, ERIC 6439 WOODSMAN DR ZEPHYRHILLS FL 33544 D BEDNAR, ERIC 6439 WOODSMAN DR ZEPHYRHILLS FL 33544 D LOWE, SHEILA	it and title if applicable. (NOTE: F D DIRECTORS DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY- 5.1 TITLE 5.2 NAME	ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	D KEITH 2503 Lutz	R. BEDNAM MOBILAIRE D	DFFICERS AN	☐ Change ☐ Change ☐ Change	Addition Addition Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered agening of FICERS AND DIP / T / C BEDNAR, JOSPEH JR 6439 WOODSMAN DR ZEPHYRHILLS FL 33544 D/V/T BEDNAR, THERESA 6439 WOODSMAN DR ZEPHYRHILLS FL 33544 D/S/M BEDNAR, CHARLOTTE 6439 WOODSMAN DR ZEPHYRHILLS FL 33544 D BEDNAR, ERIC 6439 WOODSMAN DR ZEPHYRHILLS FL 33544 D BEDNAR, ERIC 6439 WOODSMAN DR ZEPHYRHILLS FL 33544 D LOWE, SHEILA 26234 BRAHMA DR	it and title if applicable. (NOTE: F D DIRECTORS DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 3.3 STREE 3.4 CITY- 3.1 TITLE 4.2 NAME 4.3 STREE 4.2 NAME 4.3 STREE 4.5 TITLE 5.2 NAME 5.3 STREE 5.3 STREE 5.3 STREE 5.3 STREE 5.3 STREE 5.3 STREE	ET ADDRESS ST-ZIP	D KEITH 2503 Lutz	R. BEDNAM MOBILAIRE D	DFFICERS AN	☐ Change ☐ Change ☐ Change	Addition Addition Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	M familiar with, and accept the obligate Signature, typed or printed name of registered agent OFFICERS AN DIP / T/C BEDNAR, JOSPEH JR 6439 WOODSMAN DR ZEPHYRHILLS FL 33544 D/V/T BEDNAR, THERESA 6439 WOODSMAN DR ZEPHYRHILLS FL 33544 D/S/M BEDNAR, CHARLOTTE 6439 WOODSMAN DR ZEPHYRHILLS FL 33544 D BEDNAR, ERIC 6439 WOODSMAN DR ZEPHYRHILLS FL 33544 D BEDNAR, ERIC 6439 WOODSMAN DR ZEPHYRHILLS FL 33544 D LOWE, SHEILA	it and title if applicable. (NOTE: F D DIRECTORS DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 3.3 STREE 3.4 CITY- 4.1 TITLE 4.2 NAME 4.2 NAME 4.3 STREE 4.5 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-S 5.3 STREE	ET ADDRESS ST-ZIP	D KEITH 2503 Lutz	R. BEDNAM MOBILAIRE D	DFFICERS AN	☐ Change ☐ Change ☐ Change ☐ Change	Addition Addition Addition Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered agening of FICERS AND DIP / T / C BEDNAR, JOSPEH JR 6439 WOODSMAN DR ZEPHYRHILLS FL 33544 D/V/T BEDNAR, THERESA 6439 WOODSMAN DR ZEPHYRHILLS FL 33544 D/S/M BEDNAR, CHARLOTTE 6439 WOODSMAN DR ZEPHYRHILLS FL 33544 D BEDNAR, ERIC 6439 WOODSMAN DR ZEPHYRHILLS FL 33544 D BEDNAR, ERIC 6439 WOODSMAN DR ZEPHYRHILLS FL 33544 D LOWE, SHEILA 26234 BRAHMA DR	it and title if applicable. (NOTE: F D DIRECTORS DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY- 4.1 TITLE 4.2 NAME 4.2 NAME 4.3 STREE 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-S 6.1 TITLE 5.4 CITY-S 6.1 TITLE	ET ADDRESS ST-ZIP	D KEITH 2503 Lutz	R. BEDNAM MOBILAIRE D	DFFICERS AN	☐ Change ☐ Change ☐ Change	Addition Addition Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered agening of FICERS AND DIP / T / C BEDNAR, JOSPEH JR 6439 WOODSMAN DR ZEPHYRHILLS FL 33544 D/V/T BEDNAR, THERESA 6439 WOODSMAN DR ZEPHYRHILLS FL 33544 D/S/M BEDNAR, CHARLOTTE 6439 WOODSMAN DR ZEPHYRHILLS FL 33544 D BEDNAR, ERIC 6439 WOODSMAN DR ZEPHYRHILLS FL 33544 D BEDNAR, ERIC 6439 WOODSMAN DR ZEPHYRHILLS FL 33544 D LOWE, SHEILA 26234 BRAHMA DR	it and title if applicable. (NOTE: F D DIRECTORS DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 4.2 NAME 4.2 NAME 4.3 STREE 5.1 TITLE 5.2 NAME 5.3 STREE 5.1 TITLE 5.2 NAME 6.1 TITLE 6.2 NAME	ET ADDRESS ST-ZIP	D KEITH 2503 Lutz	R. BEDNAM MOBILAIRE D	DFFICERS AN	☐ Change ☐ Change ☐ Change ☐ Change	Addition Addition Addition Addition

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 changes or on an attachment with an address, with all other like empowered.

SIGNATURE: