

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 553906 (1)  
1. Corporation Name B.C.R. of Gainesville

Principal Place of Business Mailing Address  
7104 West unia ave SAME  
Gainesville, Fla 32607

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21		26		5/20/1991	5/1/1995
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	Applied For
22		27		59-3066788	Not Applicable
City & State		City & State		5. Certificate of Status Desired	\$8.75 Additional Fee Required
23		28		<input type="checkbox"/>	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	6. Election Campaign Financing Trust Fund Contribution	
24	25	29	30	<input type="checkbox"/>	
9. Name and Address of Current Registered Agent				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	
Cecil A. Cowan Jr. 8018 S.W. 17th Pl. Gainesville, Fla. 32607				<input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
Cecil A. Cowan Jr. 8018 S.W. 17th Pl. Gainesville, Fla. 32607				81	Name
				82	Street Address (P.O. Box Number is Not Acceptable)
				83	
				84	City
				FL	85 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 *Cecil A. Cowan Jr.* DATE 5-7-96

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	D/Pres.	<input type="checkbox"/> DELETE	1. TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition		
NAME	Cowan Cecil A. Jr.		2. NAME				
STREET ADDRESS	8018 S.W. 17th place		3. STREET ADDRESS				
CITY-ST-ZIP	Gainesville, Fla. 32607		4. CITY-ST-ZIP				
TITLE	S/T	<input type="checkbox"/> DELETE	5. TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition		
NAME	Rita L. Cowan		6. NAME				
STREET ADDRESS	8018 S.W. 17th Pl.		7. STREET ADDRESS				
CITY-ST-ZIP	Gainesville, Fla. 32607		8. CITY-ST-ZIP				
TITLE	D	<input checked="" type="checkbox"/> DELETE	9. TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition		
NAME	Nancy Wilkou		10. NAME				
STREET ADDRESS	1800 N. Main St		11. STREET ADDRESS				
CITY-ST-ZIP	Gainesville Fla. 32609		12. CITY-ST-ZIP				
TITLE	D.	<input checked="" type="checkbox"/> DELETE	13. TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition		
NAME	Paul Silverman		14. NAME				
STREET ADDRESS	1800 N. Main St		15. STREET ADDRESS				
CITY-ST-ZIP	Gainesville, Fla. 32609		16. CITY-ST-ZIP				
TITLE		<input type="checkbox"/> DELETE	17. TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition		
NAME			18. NAME				
STREET ADDRESS			19. STREET ADDRESS				
CITY-ST-ZIP			20. CITY-ST-ZIP				
TITLE		<input type="checkbox"/> DELETE	21. TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition		
NAME			22. NAME				
STREET ADDRESS			23. STREET ADDRESS				
CITY-ST-ZIP			24. CITY-ST-ZIP				
				400001819784 -05/14/96--01016--003 ***225.00			
				5/13/96			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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.

SIGNATURE: *Cecil A. Cowan Jr.* DATE: 5-7-96 352-332-3338

CR2E034 (12/95)