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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

B.L.W., INC.

S65938

(0)

FILED May 11 1998 8:00am Secretary of State



| Principal Place of Business | ace of Business Mailing Address | | | - | NA BARAN BIRAN BARAN BARAN BARAN BARAN BARAN BARAN |
|--|-------------------------------------|------------------------------|--|--|---|
| 12870 US 98 WEST | | | | | |
| DESTIN FL 32541 | 32541 DESTIN FL 32541 | | | DO NOT WOIT | E IN THIS SOURCE |
| US | U\$ | | DO NOT WRITE IN THIS SPACE | | |
| | | | | 3. Date Incorporated or Qualified 07/09/1991 | |
| 2. Principal Place of Business | 2a. Mailing Address | | | 4. FEI Number | Applied For |
| 21 | 26 | | 59-3085780 | Not Applicable | |
| Sulte, Apt. #, etc. | Suite, Apt. #, etc. | | 5. Certificate of Status Desired | \$8.75 Additional | |
| 22 | 27 | | 5. Certificate of Status Desired | Fee Required | |
| City & State | City & State | | | 6, Election Campaign Financing | \$5.00 May Be |
| 23 | 28 | Zip Country | | Trust Fund Contribution | Added to Fees |
| Zip Country | ⊢ ¬ ' | 30 | | This corporation owes or has personal Property Tax due June | |
| 24 25 25 Name and Address of Current | | 30] | | 10. Name and Address of New Re | |
| LOVELACE, DEWITT M. | y <u>.y -</u> <u></u> | 81 | Name | | |
| 12870 US 98 WEST | | | Stroot Addro | occ /P.O. Boy Number is Not Accepta | hle) |
| DESTON FL 32541 | | 82 | Street Address (P.O. Box Number is Not Acceptable) | | |
| | | 83 | | | |
| | | 84 | City | | 85 Zip Code |
| | | | • | | FL |
| Pursuant to the provisions of Sections 607.0502 office or registered agent, or both, in the State of agent. I am familiar with, and accept the obligat | of Etorida. Such change was a | uthorized by | the corporation | oration submits this statement for the on's board of directors. I hereby acce | purpose of changing its registered pt the appointment as registered |
| SIGNATURE Signature, typed or printed name of registered agent | and tax if soulicable (NOI) | Registered Agen | I signature require | d when reinstaling) | DATE |
| 12. OFFICERS AND | | 13. | | ADDITIONS/CHANGES TO OFFI | CERS AND DIRECTORS IN 12 |
| TITLE P | DELETE | TE 1.1 TITLE | | | Change Addition |
| NAME LOVELACE, DEWITT(A) | | 1.2 NAME | | with M. Lovelace 53 Burnt Pine Co | R |
| STREET ADDRESS 3253 BURNT PINE COVE | | 1.3 STREET A | | | |
| CITY-ST-ZIP DESTIN FL | | 1.4 CHY-ST | - ZIP D | estin , FL 3254 | |
| TITLE VS | ☐ DELETE | 21 TITLE | | • | Change Addition |
| NAME LOVELACE, SUSAN STREET ADDRESS 3253 BURNT PINE COVE | | 2.2 NAMF | | | |
| DECTIN EL | | 2.3 STREET ADDRESS | | | |
| TITLE DESTINATE | DELETE | 2.4 CITY-S1-ZIP 3.1 TITLE | | | Change Addition |
| NAME | الماري الماري | 3.2 NAME | | | |
| STREET ADDRESS | | 3.3 STREET ADDRESS | | | |
| CITY-ST-ZIP | | 3.4. CITY-ST-7IP | | | |
| TITLE | DELETE | 4.1 TIBLE | | | ☐ Change ☐ Addition |
| NAME | | 4. 2 NAME | | | |
| STREET ADDRESS | | 4.3 STREET ADDRESS | | | |
| CITY-ST-ZIP | | 4.4 CITY-ST | - ZIP | 444 | |
| TITLE | ☐ DELETE | 5.1 TITLE | | | Change Addition |
| NAME | | 5.2 NAME | | | |
| STREET ADDRESS | | 5.3 STREET A | • | | |
| C(TY-ST-Z)P | T belete | 5.4 CITY-ST | - ZIP | | Change Addition |
| TOTLE | ☐ DELETE | 6.1 TITLE | | | ☐ Change ☐ Addition |
| NAME | | 6.2 NAME 6.3 STREET A | L DODGE CO | | |
| STREET ADDRESS | | | | | |
| CITY-ST-ZIP | | 6.4 CITY - S1 | i | | |

Indicated on this annual report or supplied with this ming does not quality for the exemption stated in Section 119.07(3)(), Florida Statutes, Turriner certify that fine 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.