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

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PROFIT
CORPORATION
ANNUAL REPOR
1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT	#	V02023	(2)

BOSSHARDT PROPERTY MANAGEMENT, INC.

Mailing Address Principal Place of Business

1214 NW 8TH AVENUE GAINESVILLE FL 32601

GIANESVILLE FL 32606

1214 NW 8TH AVENUE

GAINESVILLE FL 32601

GAINESVILLE FL 32601	Children in care.					
US	US		3. Date Incorporated or Qualified 12/24/1991	3a. Date of Last Report 04/27/1995		
	2a. Mailing Address		4. FEI Number	Applied For		
2. Principal Place of Business	$\rightarrow 10^{\circ}$ A $\mu(a)$ / a		59-3099689	Not Applicable		
21 1810 NW & ST Suite, Apt #, etc.	26 1 8 10 10 10 4 5	<u>' </u>	5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City 8 State	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
23 GAINESUILL 1-L 24 32609 25 USA	28 GAINESVICE 29 32609 30	untry	(Johns Carrenso	□No		
24 0260 1 25 USA	2.0	7	10. Name and Address of New Registered Agent			
9, Name and Address of Cur CARPENTER, RONALD A.	ent negistered Agent	81 Name 82 Street Add	dress (P.O. Box Number is Not Acceptat	ole)		
4127 NW 27TH LANE Suite B		83		85 Zip Code		
GIANESVILLE FL 32606		84 City				

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.

2.	Signature bytest or production in citricy territoria it souther class to active characteristics. OFFICERS AND DIRECTORS		OFFICERS AND DIRECTORS 13. ADDITIONS OF ANALYSIS OF A CONTROL OF THE CONTROL OF T				
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IAME	BOSSHARDT, CAROL		1.2 NAME				
TREET ADDRESS	5542 NW 43RD STREET		1.3 STREET ADDRESS				
OTY-ST-ZIP	GAINESVILLE FL		14 C-1 r ST-ZiF		Change	☐ Addition	
TITLE	DPS	☐ DELETE		DPS	G. Ournes	L.,	
NAME	MUNSELLE, WILLIAM		2.2 NAME	MUNISEUE, WILLIAM 1810 NW 6 ST			
STREET ADDRESS	1214 NW 8TH AVENUE		2.3 STREET ADDRESS				
City-S1-ZIF	GAINESVILLE FL		2.4 CITY ST - ZIP	GAINESUILLE FI 32609	Change	Addition	
TILE	VP	DELETE	3 1 TITLE	VP	[-] oa.		
L AME	CARPENTER, RONALD		3.2 NAME	MUNSELLE, WILLIAM 1810 NW 6 ST			
STREET ADDRESS	5608 NW 43RD ST		3.3 STREET ADDRESS	1810 NW 6 57			
DHY-ST-ZIF	GAINESVILLE FL		3 4 CITY - ST - ZIP	GAINESVILLE FL 32609	Change	Addition	
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NAME			5.2 NAME				
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City-S1-ZiP			5.4 CITY - ST ZIP		Change	Addit-3	
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NAME			€ 2 NAME				
STREET ADDRESS			6.3 STHEET ADDRESS				
City -St - 7IP			6.4 City - ST - ZiP	14 (the operation stated in Section 119.076	nula Elocido Stati	itae I turther	
DODE: SI : ZIE							

14. Too hereby certify that the information supplied with this filing is vokuntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. If 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: __

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/19/96 371-7118