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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # V06237

(4)

B.T. HARDESTY AND ASSOCIATES, INC.

Principal Place of Business Mailing Address

2 PADDOCK CIR 2 PADDOCK CIR
TEQUESTA FL 33469 TEQUESTA FL 33469



3a. Date of Last Report

05/01/1995

3. Date Incorporated or Qualified

01/13/1992

1	lace of Business	Za. Mailing Addre	ess		7. ,	-El Number				Applied For	
1		26				65-0264153				Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #,	etc.		5. (Certificate of Status Des	sired			5 Additional Required	
City & State		City & State			I .	6. Election Campaign Financing Trust Fund Contribution				\$5.00 May Be Added to Fees	
21	Country	Zip	Col	untry	8, 7	This corporation has lial	bility for in	tangible tax			
]	25	29	30	ĺ	I	Florida Statutes	Yes				
1	9. Name and Address of Curr				10.	Name and Address o	of New Re	gistered A	gent		
				81 Nar	ne						
HARDESTY, BENJAMIN T.				82 Street Address (P.O. Box Number is Not Acceptable)							
2 PADDOCK CIR TEQUESTA FL 33469					83						
TEQUE	SIA FL 33469										
				84 Orty	,			FL	8 5 Z	ip Code	
	to the provisions of Sections €07.05		0	<u> </u>				,		ropistared off	
Tamhar w GNATURE	ith, and accept the obligations of, Se Signature, byted or pointed name of registered as			d Agent signa	ure required when rein			DATE			
≥.	OFFICERS A	AND DIRECTORS	13.			ADDITIONS/CHANGES	TO OFFIC				
T.F	VP	DELE	ETE 11	TITLE	1] Change	■ Addition	
M:	BERNARD, G.W.		121	NAME							
REET ADDRESS			135	INDEA FERNIS	ss						
ly-SE ZiP	TEQUESTA FL 33469		1.40	CITY - ST-ZIP							
LF		DELF	FTÉ 2 1	TITLE] Change	Addition Addition	
			221	NAME							
Mt					L.						
			235	STREET ADDR	ss						
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HEFT AODRESS 1Y+ST-ZIP EF MME HEFT AODRESS 1Y+ST-ZIP LIF			24.5 ETE 3.1 32.1 33.3 34.6 ETE 4.1	CHY-ST-ZIP TITLE NAME STREET ADDR CITY-ST-ZIP				_			
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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:

S. T. CHALLEST FINIS OF FICE OF DE

President

2/17/96 407-746-7255