

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

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **V66043** (3)

1. Corporation Name

BLUEBIRD WOMAN, INC.

Principal Place of Business

**3205 14TH AVE
VERO BCH FL 32900**

Mailing Address

**260 ISLAND CREEK DR
VERO BCH FL 32963
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/21/1992

3a. Date of Last Report

03/24/1994

2. Principal Place of Business

21 260 ISLAND CREEK DR

2a. Mailing Address

26 260 ISLAND CREEK DR

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

23 VERO BEACH FL

27 City & State

28 VERO BEACH FL

24 Zip

32963

Country

US

29 Zip

30 32963

Country

US

4. FET Number

65-0366171

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under S. 199 (23)

Florida Statutes

☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**COLLIN, JANE E
260 ISLAND CRK DR
VERO BCH FL 32963**

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

Jane E. Collin

Jane E. Collin

4-2895

12. OFFICERS AND DIRECTORS

TITLE	PTD
NAME	COLLIN, JANE E
STREET ADDRESS	260 ISLAND CREEK DR
CITY, ST, ZIP	VERO BEACH FL
TITLE	V
NAME	COLLIN, MICHEL
STREET ADDRESS	260 ISLAND CREEK DR
CITY, ST, ZIP	VERO BEACH FL
TITLE	V
NAME	CHAPIN, CHRISTINA
STREET ADDRESS	260 ISLAND CREEK DR
CITY, ST, ZIP	VERO BEACH FL
TITLE	S
NAME	PETROLAK, STEPHANIE M
STREET ADDRESS	1717 INDIAN RIVER BLVD 3301
CITY, ST, ZIP	VERO BEACH FL
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	P/T/D/S	☒ Change ☐ Addition
1. NAME	COLLIN, JANE E.	
1. STREET ADDRESS	260 ISLAND CREEK DRIVE	
1. CITY, ST, ZIP	VERO BEACH, FL 32963	
2. TITLE		☐ Change ☐ Addition
2. NAME		
2. STREET ADDRESS		
2. CITY, ST, ZIP		
3. TITLE		☒ Change ☐ Addition
3. NAME		
3. STREET ADDRESS		
3. CITY, ST, ZIP		
4. TITLE		☒ Change ☐ Addition
4. NAME		
4. STREET ADDRESS		
4. CITY, ST, ZIP		
5. TITLE		☐ Change ☐ Addition
5. NAME		
5. STREET ADDRESS		
5. CITY, ST, ZIP		
6. TITLE		☐ Change ☐ Addition
6. NAME		
6. STREET ADDRESS		
6. CITY, ST, ZIP		

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in law (see 199 (23)(b), Florida Statutes). I further certify that the information included 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 this corporation or the registered agent or registered agent-in-waiting for this corporation as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 (if changed) on this filing, and that my address is:

SIGNATURE:

Jane E. Collin

Jane E. Collin

4-2895

407-2550087

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR