

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 # **P95000056385 (4)**

1. Corporation Name
B.F. AUTOMOTIVE, INC.



Principal Place of Business
**711 S. OSPREY AVENUE
SARASOTA FL 34236**

Mailing Address
**711 S. OSPREY AVENUE
SARASOTA FL 34236**

3. Date Incorporated or Qualified
07/15/1995

3a. Date of Last Report

4. FEI Number
65-0597337

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. 193.032, Florida Statutes Yes No

2. Principal Place of Business

21 State, Apt. #, etc.

22 City & State

23 Zip

24 Country

25

2a. Mailing Address

26 State, Apt. #, etc.

27 City & State

28 Zip

29 Country

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BUCHOLTZ, WALTER L
2500 PARISIAN COURT
PUNTA GORDA FL 33950**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

85 Zip Code

FL

11. Pursuant to the provisions of Sections 607.05(2) and 607.15(8), 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 607.05(5), Florida Statutes.

SIGNATURE _____ DATE _____

12. OFFICERS AND DIRECTORS

TITLE	D - PRESIDENT	<input type="checkbox"/> DELETE
NAME	FOX, JACK H	
STREET ADDRESS	3137 DIAMOND HILL ROAD	
CITY, ST, ZIP	CUMBERLAND RI 02864	
TITLE	D - V. PRESIDENT	<input type="checkbox"/> DELETE
NAME	BUCHHOLZ, WALTER L	
STREET ADDRESS	2500 PARISIAN COURT	
CITY, ST, ZIP	PUNTA GORDA FL 33950	
TITLE	TREASURER	<input type="checkbox"/> DELETE
NAME	OWEN H. ZWALTON, JR	
STREET ADDRESS	P.O. BOX 900	
CITY, ST, ZIP	LONDON DERRY NH 03053	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY, ST, ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY, ST, ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY, ST, ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY, ST, ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY, ST, ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY, ST, ZIP	

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)(k), 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: *Owen H. Zwaltow, Jr* **Treas.** **2/19/96** **603-425-6285**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)