

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 03, 2000 8:00 am
Secretary of State

05-03-2000 90041 008 \*\*\*150.00

DOCUMENT # L30451

1. Entity Name
F & W CONCESSIONS, INC.

Principal Place of Business

1561 S CONGRESS
148
DELRAY BCH FL 33445

Mailing Address

% J PATRICK DYAL
1401 E BROWARD BLVD
FT LAUDERDALE FL 33301-2118

2. Principal Place of Business

8949 SE BRIDGE RD

3. Mailing Address

Suite, Apt. #, etc.
292

Suite, Apt. #, etc.

City & State

HOBE Sound FL

City & State

Zip

33455

Country

MARTIN

Zip

Country

4. FEI Number

06-1284649

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DYAL, J PATRICK
1401 E BROWARD BLVD
FT LAUDERDALE FL 33301

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

Table with 6 rows for Officers and Directors. Includes fields for Title, Name, Street Address, City-ST-ZIP, and a Delete checkbox.

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

Table with 6 rows for Additions/Changes to Officers and Directors. Includes fields for Title, Name, Street Address, City-ST-ZIP, and Change/Addition checkboxes.

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath...

SIGNATURE: Dennis R Fraleigh
Date: 4/24/00
Daytime Phone #: 9148765821

CP20004 (0/00)