

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 15, 2003 8:00 am
Secretary of State

08-15-2003 90085 043 ***150.00

0123429 AT

DOCUMENT # **P01000077084**

1. Entity Name

THE BUTLERS PANTRY OF BAYTOWN, INC.



Principal Place of Business
**3900 MARRIOTT DR.
SUITE E
PANAMA CITY BEACH FL 32408**

Mailing Address
**P.O. BOX 27062
BAY POINT FL 32411**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

CHECK HERE IF MAKING CHANGES

4. FEI Number **59-3735564**

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**LAFONE, BRUCE E II
3900 MARRIOTT DR.
SUITE E
PANAMA CITY BEACH FL 32408**

Name
EDWIN + NANCY CRISWELL
Street Address (P.O. Box Number is Not Acceptable)
3900 MARRIOTT DR STE E
P.O. BX 27062
City **PANAMA CITY** FL Zip Code **32411**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

Nancy Criswell

8.13.03

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LAFONE, BRUCE E II 105 SANDALWOOD LN PANAMA CITY FL 32413	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP LAFONE, BRUCE E 105 SANDALWOOD LN PANAMA CITY FL 32413	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T/S LAFONE, JEANIE G 105 SANDALWOOD LN PANAMA CITY FL 32413	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P EDWIN M. CRISWELL 3900 MARRIOTT DR P.O. BX 27062 PANAMA CITY, FL. 32411	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T/S NANCY S. CRISWELL 3900 MARRIOTT DR P.O. BOX 27062 PANAMA CITY FL. 32411	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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; 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Edwin M. Criswell

Date

Daytime Phone #

8.13.03 850.236.7055

CFR2034 (4/03)

Attachment

80138908



The Butler's Pantry #PS100077084

at Bay Point Marina

To Whom it May Concern

In April 2003 my husband & I made an offer to purchase, The Butler's Pantry ^{Inc} we did so and closed on the corporation 5.21.03 Upon receiving this UBR. I contacted Mrs Jeanie Lafone who told me that she had contacted someone and they told her that since she was selling the business that she did not have to file the report. For since this is the first we as new owners have received this report I am enclosing a check for \$150.00 for the original filing fee.

Thank you

Nancy Crivell
Sec/Treas.