FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P93000012180 (4)

COUNTRY CRAFTS BY MARY ANN, INC.

Principal Place of Business 21435 SHIMMERTRACE CIRCLE Mailing Address

21435 SHIMMERTRACE CIRCLE

FILED May 14 1997 8:00am Secretary of State



BOCA RATON	FL 33428	BOCA RATON FL 33428-118	12		
				3. Date Incorporated or Qualified 02/17/1993	3a. Date of Last Report 01/26/1996
	ace of Business	2a. Mailing Address	thal in	4. FEI Number	Applied Fo
21 12961			thet no	65-0403316	Not Applic
Suite, Apt.	#, etc. 	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	piter Fla	City & State 28 Juniter	Fla	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24 334°	18 25 PBC		o PBC		Yes No
	g. Name and Address of Current	Registered Agent	- 1	10. Name and Address of New Re	gistered Agent
2143	/EESE, MARY ANN 95 SUMMERTRACE CIR. CA RATON FL 33428		81 Name 82 Street 1 2	Maly Ann Dewl Address (P.O. Box Nurpheris NovAccepte A LO LOUK	ISE 学 NO
			84 City -	Tup Iter	FL 85 33070
11. Pursuant to office or reagent. Lac	egistered agont, or both, in the State on the military with, and accept the obligate the obligate of the state of the stat	of Florida. Such change was autions of, Section 607,0505, Flor LWLLSL (NOTE: (NOTE: (NOTE:)	s, the above-named thorized by the cor ida Statutes Registered Agent signature		pt the appointment as register #28-97 DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFI	
TITLE	PD	☐ DELETE	1.1 TITLE	Dome, Ann Deliver	O Mange □ Ad
NAME	DEWEESE, MARY A		1.2 NAME		
STREET ADDRESS	21435 SUMMERTRACE CIR		1.3 STREET ADDRESS	12968 - 169th Coast	no and
CITY+ST-ZIP	BOCA RATON FL 33428		1.4 CITY-ST-ZIP	Quartes Pla	33471
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CITY-ST-ZIP	BOCA RATON FL 33428		2.4 CITY-ST-ZIP	12960 -169100	F /18
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STREET ADDRESS			4.3 STREET ADDRESS		
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STREET ADDRESS			6.3 STREET ADDRESS		
Offy-St-ZiP			6.4 CITY-ST-ZIP		
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14. I do 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 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