

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUN -1 AM 8:57

DOCUMENT # P94000058208 (7)

1. Corporation Name
RED BARN FLEA MARKET, INC.

Principal Place of Business Mailing Address
1707 1ST ST. EAST BRADENTON FL 34208

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **08/05/1994** 3a. Date of Last Report
4. FEI Number **65-0566637** 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. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc 26 Suite, Apt. #, etc
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 30

9. Name and Address of Current Registered Agent
**MCGUIRE, PRATT, MASIO & FARRANCE, P.A.
1001 3RD AVENUE WEST
SUITE 600
BRADENTON FL 34205**

10. Name and Address of New Registered Agent
81 Name **WILLIAMS, PARKER, HAINES, DIETZ & GETZEN**
82 Street Address (P.O. Box Number is Not Acceptable) **1550 KINGING BOULEVARD**
83
84 City **SARASOTA** FL 85 Zip Code **34230**

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 *[Signature]* DATE **5-1-95**

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	SHEPARD, DANIEL O
STREET ADDRESS	3622 71ST STREET EAST
CITY - ST - ZIP	PALMETTO FL 34221
TITLE	D
NAME	SHEPARD, DORA J
STREET ADDRESS	520 27TH STREET WEST
CITY - ST - ZIP	BRADENTON FL 34205
TITLE	D
NAME	STERRETT, LINDA S
STREET ADDRESS	3711 70TH STREET EAST
CITY - ST - ZIP	PALMETTO FL 34221
TITLE	D
NAME	SHEPARD, MICHAEL K
STREET ADDRESS	5112 14TH AVE. DRIVE WEST
CITY - ST - ZIP	BRADENTON FL 34209
TITLE	D
NAME	SHEPARD, RICHARD F
STREET ADDRESS	P.O. BOX 7572 N/A
CITY - ST - ZIP	WINTER HAVEN FL 33883
TITLE	
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 checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	DELETE SHE WAS NOT
23 STREET ADDRESS	A DIRECTOR
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 checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	DELETE HE WAS NOT
53 STREET ADDRESS	A DIRECTOR
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 110.07(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: *[Signature: Daniel O Shepard]* DATE: **5-1-95** TELEPHONE: **813-747-3794**

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Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000058346 (5)

1. Corporation Name
SUPER SWEET, INC.

Principal Place of Business Mailing Address
2636 QUEENSWOOD DR 2636 QUEENSWOOD DR
SEBRING FL 33872 SEBRING FL 33872

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 3a. Date of Last Report
08/08/1994

4. FEI Number Applied For / Not Applicable
65-0510486

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. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 26
Suite, Apt. #, etc Suite, Apt. #, etc
22 27
City & State City & State
23 28
Zip Country Zip Country
24 25 29 30

9. Name and Address of Current Registered Agent
CORD, HENDRIK L JR
2636 QUEENSWOOD DR
SEBRING FL 33872

10. Name and Address of New Registered Agent
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 607.0502 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 _____ (NOTE: Registered Agent signature required when resigning) _____ (DATE)

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	CORD, HENDRIK L JR
STREET ADDRESS	2636 QUEENSWOOD DR
CITY ST ZIP	SEBRING FL 33872
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	1839 S.E. Lakeview Rd
14 CITY ST ZIP	Sebring, Fla 33870
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: *Rendell L. Cord* 5/1/95 (813) 735-2272