

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT 1996		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
DOCUMENT # P95000016322 1. Corporation Name Brewmasters of Spring Hill, Inc.		

FILED

96 NOV -4 MID 15

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

*MWB
11-6-96*

REINSTATEMENT 1996

Principal Place of Business	Mailing Address
2. Principal Place of Business	2a. Mailing Address

21. 4644 Commercial Way, Spring Hill, FL 34606 Suite, Apt. #, etc.	2a. 7379 Commercial Way, Spring Hill, FL 34613 Suite, Apt. #, etc.
22. City & State 23. Spring Hill, FL 24. Zip 34606 25. Country Hernando	27. City & State 28. Spring Hill, FL 29. Zip 34613 30. Country Hernando

3. Date Incorporated or Qualified February 27, 1995	3a. Date of Last Report February 27, 1995
4. FEI Number 59-3310578	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. 189.032, Florida Statutes ☐ Yes ☒ No	8-corp

9. Name and Address of Current Registered Agent	
Thomas A. Smith 800 West Platt Street Suite 3 Tampa, FL 33606	

10. Name and Address of New Registered Agent	
81 Name Raymond P. Virgilio, CPA	85 Zip Code 34613
82 Street Address (P.O. Box Number is Not Acceptable) 7379 Commercial Way	
84 City Spring Hill, 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 *Raymond P. Virgilio, CPA* **Raymond P. Virgilio, CPA** **10-22-96**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS	
TITLE	Director ☒ DELETE
NAME	Thomas A. Smith
STREET ADDRESS	800 W. Platt Street
CITY-ST-ZIP	Tampa, FL 33606
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	President/Director ☐ Change ☒ Addition
1.2 NAME	Bruce Franklin
1.3 STREET ADDRESS	4644 Commercial Way
1.4 CITY-ST-ZIP	Spring Hill, FL 34606
2.1 TITLE	Secretary/Director /VP ☐ Change ☒ Addition
2.2 NAME	Kelly Franklin
2.3 STREET ADDRESS	4644 Commercial Way
2.4 CITY-ST-ZIP	Spring Hill, FL 34606
3.1 TITLE	Director ☐ Change ☒ Addition
3.2 NAME	Raymond P. Virgilio, CPA
3.3 STREET ADDRESS	7379 Commercial Way
3.4 CITY-ST-ZIP	Spring Hill, FL 34613
4.1 TITLE	000001998990--4
4.2 NAME	-11/07/96--01050--001
4.3 STREET ADDRESS	***\$375.00 ***\$375.00
4.4 CITY-ST-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Kelly Franklin* **Kelly Franklin** **10/22/96** **0520**
Signature and typed or printed name of signing officer or director. Date Daytime Phone #

CR2034 (3/86)