## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

**PROFIT** CORPORATION **ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 168018

COLONIAL TAVERN, INC.

(0)

APPROVED AND FILED



97 JUL 31 PM 12: 57

SECRETARY OF STATE TALLAHASSEE. FLORIDA



Principal Place 2060 SO BAY EUSTIS FL 32	ST	Mailing Address 2060 SO BAY ST EUSTIS FL 32726			DO NOT WRITE IN THIS SPACE				
					3. Date Incorporated or Qualit	1	ate of Last f	-	7
6 Orleatont D	lace of Business	2a. Mailing Address			<b>02/14/1952 4.</b> FEI Number	04	<u>/15/1996</u>		4
21 20/07	S KA S	2a. Mailing Address			59-0693562			pplied For lot Applicable	$\exists$
Suite, Apt.	# etc	Suite, Apt. #, etc.						Additional	$\dashv$
22	U U	27			5. Certificate of Status Desired	d $\square$		lequired	
City & State		City & State	00 43		6. Election Campaign Financia	ng	\$5.00	May Be	٦
23 EUS		28 Ame			Trust Fund Contribution Added to Fees				
Zip	Country	Zip	Countr	у	8. This corporation owes or ha			~	
24 <b>3</b> 376	26 25 LAKE	29	30		Personal Property Tax due			No	4
	9. Name and Address of Current	r Hegistered Agent	81	Name	10. Name and Address of Ne	w Kegisterea	Agent		$\dashv$
	RRISON, EDWIN B. CPA								╛
	i north bay street Stis, fl		82	Street Add	ress (P.O. Bornand No Propries 1916 —— 7		040	7	
	STIS FL 32726		83	ļ	-08/0		10441	<del>-</del>	$\dashv$
	01101202120		,		*************************************	165.00	******1		_
			84	City		FL	<b>85</b> Zip	Code	ı
agent. I a	to the provisions of Sections 607.0502 egistered agent, or both, in the Stato im familiar with, and accept the obliga	2 and 607.1508, Florida Statu of Florida. Such change was itions of, Section 607.0505, Fl	tes, the above authorized b forida Statute	re-named cor by the corpora is.	poration submits this statement for ation's board of directors. I hereby ε	the purpose o accept the app	changing pointment as	its registered registered	
SIGNATURE	Signature, typed or printed name of registered agen	of and title if applicable (NO	TE: Registered Ag	ent signature requ	uired when reinstating)	DATE			
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO C	OFFICERS AND			IJ8
TITLE	PD	☐ DEFELE	1.1 TITLE				∐ Change	Addition	1 3
NAME	BOMBENGER, GEORGE M.		1.2 NAME						6
STREET ADDRESS	36631 SCOTTSDALE DR.			T ADDRESS					ļį
CITY-ST-ZIP	GRAND ISLAND FL 32735 VPD	DELETE	1.4 Cily-	ST-ZIP	<del></del>	<del></del>	Change	Addes	<u>-</u>  è
TITLE	WALKER, ROY M.	(V) DELETE	2.1 TITLE	•			☐ Change	☐ Addition	-   `
NAME	204 E. GOTTSCHE		2.2 NAME						
STREET ADDRESS	EUSTIS FL 32726		ľ	1 ADDRESS					1
CITY-ST-ZIP TITLE	SID	DELETE	2.4 CITY- 3.1 THLE	SI-ZIP			Change	Addition	.
NAME	BARTZER, SHARON A.	The protect	3.2 NAME	1			T Autoritie		}
STREET ADDRESS	36631 SCOTTSDALE DR.			T ADDRESS					
CITY-ST-ZIP	GRAND ISLAND FL 32835		3.4. CITY-						
TITLE		DELETE	4.1 TITLE	VI-EII			Change	Addition	$\dashv$
NAME			4. 2 NAM				-		1
STREET ADDRESS				T ADDRESS					-
CITY-ST-ZIP			4.4 CITY-	i i					1
TITLE		☐ DELETE	5.1 TITLE				☐ Change	Addition	ıŢ.
NAME			5.2 NAME						
STREET ADDRESS			5.3 STREE	T ADDRESS	N. 1				
CITY-ST-ZIP			5.4 CITY-	ST-ZIP	nal4		_		
TITLE		☐ DELETE	6.1 TITLE	X	RIOI.		Change	Addition	7
NAME			6.2 NAME	0	7				
STREET ADDRESS			6.3 STREE	1 ADDRESS	•				
CITY-ST-ZIP			6.4 CITY-	ST-ZIP					

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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.



Banquets • Catering • Traveling Bar-B-Q Show



(352) 589-0277 2060 S. Bay Street Eustis, FL 32726 FAX (352) 589-1057

July 15, 1997

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, Fl 32314

Re: Document # 168018 Colonial Tavern, Inc.

To whom it may:

The above referenced document was originally completed and mailed along with a check in the amount of \$165.00 on February 13, 1997 in order to meet the deadline for filing before a penalty was applied. Apparently this document was never recieved or lost.

After speaking with Amy Allen today I am enclosing the second document along with a check for the same amount.

Thank you for your help.

Sincerely,

Sharon Bartzer Secretary/Treasurer