

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 19, 2004 8:00 am
Secretary of State

04-19-2004 90236 004 ***150.00

DOCUMENT # 319549

1. Entity Name

NEFF'S FOXFIRE INN, INC.



Principal Place of Business

Mailing Address

~~511 HOWARD AVE.~~ *new ADDRESS* ~~511 HOWARD AVE.~~
~~LAKELAND FL 33801-3404~~ ~~LAKELAND FL 33801-3404~~

2. Principal Place of Business

630 Kirkwood Ct

Suite, Apt. #, etc.

3. Mailing Address

630 Kirkwood Ct

Suite, Apt. #, etc.



MOORE

CR2E034 (11/03)

City & State

LAKELAND FL

City & State

LAKELAND FL

4. FEI Number

59-1169993

Applied For

Not Applicable

Zip

33813

Country

USA

Zip

33813

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

NEFF, JAMES D.
511 HOWARD AVE.
LAKELAND FL 33801

630 Kirkwood Ct 33813
LAKELAND, FL, USA

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

4-15-04

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

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

TITLE PD ☐ Delete
NAME NEFF, JAMES D.
STREET ADDRESS ~~511 HWY 90 NORTH~~
CITY-ST-ZIP LAKELAND FL

TITLE SD ☐ Delete
NAME MARTIN, MICHAEL (ASS'T)
STREET ADDRESS 400 FLORIDA FED. BLDG.
CITY-ST-ZIP LAKELAND FL

TITLE V ☐ Delete
NAME NEFF, KIRK R
STREET ADDRESS ~~115 HWY 90 NORTH~~
CITY-ST-ZIP ~~LAKELAND FL~~

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DD ☐ Change ☐ Addition
NAME James D. NEFF
STREET ADDRESS **630 Kirkwood Ct**
CITY-ST-ZIP **LAKELAND, FL 33813 USA**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE V ☐ Change ☐ Addition
NAME Kirk R. Neff
STREET ADDRESS **630 Kirkwood Ct.**
CITY-ST-ZIP **LAKELAND, FL 33813 USA**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

James D NEFF

4-15-04 863 648-

Date

Daytime Phone # **46570**