

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

000337

**FILED**  
**May 01, 1999 8:00 am**  
**Secretary of State**

05-01-1999 90084 044 \*\*\*150.00

**PROFIT  
CORPORATION  
ANNUAL REPORT  
1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # 344605**

1. Corporation Name  
**TOWN TAVERN, INC.**

Principal Place of Business  
512 NORTH FEDERAL HWY.  
P. O. BOX 333  
BOYNTON BEACH FL 33435  
US

Mailing Address  
601 NEW BRUNSWICK AVENUE  
P. O. BOX 333  
RAHWAY NJ 07065-0333

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**04/15/1969**

4. FEI Number

**59-1258580**

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 owes the current year Intangible  
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip 25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip 30 Country

9. Name and Address of Current Registered Agent

**PARELLA, JOANNE P.  
5204 WATERVIEW CIR  
PALM SPRINGS FL 33461**

10. Name and Address of New Registered Agent

81 Name **Cheche, Peter V. Sr.**

82 Street Address (P.O. Box Number is Not Acceptable)  
**Pine Ridge South Condominiums**

83 **Pine Hov Circle, Bldg 203 Apt. D-2**

84 City **Lake Worth** 85 Zip Code **FL 33463**

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 **Peter V. Cheche, Sr. President**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

**April 28, 1999**

DATE

12. OFFICERS AND DIRECTORS

TITLE **PD** ☐ DELETE  
NAME **CHECHE, PETER**  
STREET ADDRESS **601 NEW BRUNSWICK AVENUE**  
CITY-ST-ZIP **RAHWAY NJ**

TITLE **ST** ☐ DELETE  
NAME **GERBINO, CAROLE A.**  
STREET ADDRESS **601 NEW BRUNSWICK AVENUE**  
CITY-ST-ZIP **RAHWAY NJ**

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 ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE **ST** ☒ Change ☐ Addition  
2.2 NAME **Geiling, Carole A.**  
2.3 STREET ADDRESS **601 New Brunswick Avenue**  
2.4 CITY-ST-ZIP **Rahway, NJ 07065**

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
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 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, with all other like empowered.

SIGNATURE: **Peter V. Cheche** SIGNATURE REQUIRED: **Peter V. Cheche, Sr. President** 4-28-99 732-388-3540  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/98)