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PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

FAIRCLOUGH CATERING CO., INC.

FILED

Feb 18 1998 8:00am

Secretary of State

Principal Plac	ce of Business	Mailing Address			1 105100 1(1)(010() 1050) (1010 0(15) 1)5	t dibit dibit bibit bibit arbit arbit bibit tobt
3948 GULF BLVD 3848 GULF BLVD ST PETERSBURG BEACH FL 39706 ST PETERSBURG BEACH F			CH FL 33706		DO NOT WRITE	IN THIS SPACE
					3. Date Incorporated or Qualified	IN THIS STACE
1					05/30/1969	
2. Principal F	Place of Business	2a, Mailing Address			4. FEt Number	Applied For
21		26			13-2554350	Not Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional
22		27				Fee Required
City & State	te	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zφ	Coun	try	8. This corporation owes or has pai	· •
24	25	29	30		Personal Property Tax due June	
ļ <u>-</u>	g. Name and Address of Curren	it Registered Agent		31 Name	10. Name and Address of New Reg	Jistered Agent
	AIRCLOUGH, RICHARD W		Ľ	Name		
	150 BELLE VISTA DR. E. T. PETERSBURG BCH FL 33706		€	Street Add	lress (P.O. Box Number is Not Acceptab	le)
"	. TETEROSONO BOTT TE SOTO		ĩ	33		
				34 City		85 Zip Code
						FLI
office or	to the provisions of Sections 607.050 registered agent, or both, in the State	⊋ and 607.1508, Florida Stat Fof Florida Such change wa	utes, the abo s authorized	ove-named cor by the corpora	poration submits this statement for the partion's board of directors. I hereby accep	urpose of changing its registered It the appointment as registered
agent la	amī familiar with, and accept the obliga	ations of, Section 607.0505, f	Florida Statu	tes.	• •	
SIGNATURE	Signature, typed or protect harrie of registered age	end end blke if acodic ship	Olf Recurtored	Agent signature remu	ired when reinstating)	DATE
12.	OFFICERS ANI		13.	Agora algitatore reco	ADDITIONS/CHANGES TO OFFIC	
TITLE	PD	DELFTE	1 1 TITL	E		Change Addition
NAME	FAIRCLOUGH, RICHARD W		1.2 NAM	1E		
STREET ADDRESS	3850 BELLE VISTA DR. E.		1.3 STAT	EET ADDRESS		
CITY-ST-ZIP	ST PETERSBURG FL		4.4.003	(07 70)		
TITLE	T		1.4 U(1	'-ST-ZIP		
NAME		DETELE	2.1 THL			Change Addition
	STEIN, CHARLES P.	DELETE		{		☐ Change ☐ Addition
STREET ADDRESS	SAGAMORE DRIVE	DELETE	2.1 TITL: 2.2 NAM	{		☐ Change ☐ Addition
CITY-ST-ZIP	SAGAMORE DRIVE CARMEL NY	<u>-</u>	2.1 THTU 2.2 NAM 2.3 STRI 2.4 CITI	E HE EET ADDRESS Y-ST-ZIP		
CITY-ST-ZIP TITLE	SAGAMORE DRIVE CARMEL NY VSD	DELETE	2.1 THTU 2.2 NAM 2.3 STRI 2.4 CITL 3.1 TITL	E HE EET ADDRESS Y-ST-ZIP E		☐ Change ☐ Addition☐ Change ☐ Addition☐ Change ☐ Addition☐
CITY-ST-ZIP TITLE NAME	SAGAMORE DRIVE CARMEL NY VSD FAIRCLOUGH,RENATE	<u>-</u>	2.1 TITL 22 NAM 2.3 STRI 2.4 CITL 3.1 TITL 3.2 NAM	E SET ADDRESS Y-ST-ZIP E		
CITY-ST-ZIP TITLE NAME STREET ADDRESS	SAGAMORE DRIVE CARMEL NY VSD FAIRCLOUGH, RENATE 3850 BELLE VISTA DR. E.	<u>-</u>	2.1 TITL 2.2 NAM 2.3 STRI 2. 4 CIT 3.1 TITL 3.2 NAM 3.3 STRI	E EET ADDRESS Y-ST-ZIP E EET ADDRESS		
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	SAGAMORE DRIVE CARMEL NY VSD FAIRCLOUGH,RENATE	DELETE	2.1 THTL 2.2 NAM 2.3 STRI 2.4 CH 3.1 THTL 3.2 NAM 3.3 STRI 3.4 CH	E EET ADDRESS Y-ST-ZIP E EET ADDRESS Y-ST-ZIP Y-ST-ZIP		☐ Change ☐ Addition
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14. Thereby 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 supplience lat 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 13 if changed of on an attachment with an address.