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

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 27, 1999 8:00am

**Secretary of State** 

01-27-1999 90039 021 \*\*\*150.00

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 416034 1. Corporation Name

LITTLE DUTCH BAKERY, INC.

LITTLE DO	JICH BANERT, INC.							
Principal Place	of Business	Mailing Address			, , , , , , , , , , , , , , , , , , , ,			
2178 MONTANA AVE. N.E. ST. PETERSBURG FL 33703		2178 MONTANA AVE. N.E. ST. PETERSBURG FL 33703		DO NOT WE	ITE IN THIS SPACE			
SI. PETENSBURG	372 33700	• • • • • • • • • • • • • • • • • • • •			3. Date Incorporated or Qualifed		<u> </u>	$\neg$
					01/04/1973	· · · · · · · · · · · · · · · · · · ·	<del></del>	
2. Principal Pla	ace of Business	2a. Mailing Address		· · · · · · · · · · · · · · · · · · ·	4. FEI Number	· \	Applied F	
Z. Principai Fia	ice of Bosinojo	26			<u>59-1438132</u>		Not Applie	
Suite, Apt. #	f. etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		<b>75</b> Additione Required	
22	•	27		<u> </u>			<del></del>	
City & State		City & State			6. Election Campaign Financing	1 1	.00 May B ded to Fees	
23	·	28			Trust Fund Contribution		101 101 663	<u>'</u>
Zip	Country	Zip	Country	•	8. This corporation owes the cu	rrent year intangible	i □No	
24	25	="	30		Personal Property Tax.  10. Name and Address of New			
<u></u>	9. Name and Address of Current	Registered Agent		l Maria	10. Name and Address of New	registores rigent	_	
		,	81					
	SLER, DAIVD Pasadena avenue		82	Street Add	dress (P.O. Box Number is Not Accep	table)	eur mar se	1 1 2 2
	ETERSBURG FL	•	83			平理 6 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		
	the state of the s		84			FL 85	Zip Codé	
11. Pursuant t	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	of Florida. Such change was au	thorized by	the corpora	tion's board of directors. I hereby acc	ept the appointment	as registere	ea
agent. I ar	m familiar with, and accept the obligati	ions of, Section 607.0505, Flori			·			
agent. I ar	m familiar with, and accept the obligate	t and title if applicable. (NOTE:	Registered Age		sired when reinstating)	DATE		
agent. I ar	m familiar with, and accept the obligati	t and title if applicable. (NOTE:  D DIRECTORS	Registered Age		·	DATE	ECTORS IN	
agent. I ar SIGNATURE	m familiar with, and accept the obligate	t and title if applicable. (NOTE:	Registered Age 13. 1.1 TITLE	ont signature requ	sired when reinstating)	DATE OFFICERS AND DIR	ECTORS IN	112
agent. I ar SIGNATURE 12.	ri familiar with, and accept the obligation of familiar with, and accept the obligation of familiar with a signature, typed or printed name of registered agent OFFICERS AND PD DECOSMO, JOHN B	t and title if applicable. (NOTE:  D DIRECTORS	Registered Age 13. 1.1 TITLE 1.2 NAME	ant signature requ	sired when reinstating)	DATE OFFICERS AND DIR	ECTORS IN	112
agent. I ar SIGNATURE  12.	ri familiar with, and accept the obligation of familiar with, and accept the obligation of familiar with a signature, typed or printed name of registered agent OFFICERS AND PD DECOSMO, JOHN B 2178 MONTANA AVE NE	t and title if applicable. (NOTE:  D DIRECTORS	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE	ent signature requ	sired when reinstating)	DATE OFFICERS AND DIR	ECTORS IN	112
agent. I ar SIGNATURE  12. TITLE NAME	ri familiar with, and accept the obligation of familiar with, and accept the obligation of familiar with a signature, typed or printed name of registered agent OFFICERS AND PD DECOSMO, JOHN B	t and title if applicable. (NOTE:  D DIRECTORS	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE	ent signature requirements and signature require	sired when reinstating)	DATE DEFICERS AND DIR	ECTORS IN	112
agent. I ar SIGNATURE  12. TITLE NAME STREET ADDRESS	ri familiar with, and accept the obligation of familiar with, and accept the obligation of familiar with a signature, typed or printed name of registered agent OFFICERS AND PD DECOSMO, JOHN B 2178 MONTANA AVE NE	t and title if applicable. (NOTE:  D DIRECTORS	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE	ent signature requirement signature requirem	sired when reinstating)	DATE OFFICERS AND DIR	ECTORS IN	1 12 Addition
agent. I ar SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Traniliar with, and accept the obligation of registered eigent OFFICERS AND PD DECOSMO, JOHN B 2178 MONTANA AVE NE ST PETERSBURG, FL 00000	t and title if applicable. (NOTE:  D DIRECTORS	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME	ont signature requirements of the si	sired when reinstating)	DATE DEFICERS AND DIR	ECTORS IN	1 12 Addition
agent. I ar SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Tamiliar with, and accept the obligation of familiar with, and accept the obligation of familiar with, and accept the obligation of familiar of famili	t and title if applicable. (NOTE:  D DIRECTORS	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME	ent signature requirement signature requirem	sired when reinstating)	DATE DEFICERS AND DIR	ECTORS IN	1 12 Addition
agent. I ar SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Tamiliar with, and accept the obligation of familiar with, and accept the obligation of FICERS AND OFFICERS AND DECOSMO, JOHN B 2178 MONTANA AVE NE ST PETERSBURG, FL 00000 STD DECOSMO, JUDITH M	t and title if applicable (NOTE: D DIRECTORS DELETE	Registered Age  13.  1.1 TITLE  1.2 NAME  1.3 STREE  1.4 CITY-  2.1 TITLE  2.2 NAME  2.3 STREE  2.4 CITY-	ert Address ert Address ert Address ert Address ert Address ert Address	sired when reinstating)	DATE OFFICERS AND DIR	ECTORS IN	1 12 Addition
agent. I ar SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Tamiliar with, and accept the obligation of familiar with, and accept the obligation of familiar with, and accept the obligation of familiar of famili	t and title if applicable. (NOTE:  D DIRECTORS	Registered Age  13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY 3.1 TITLE	et Address -st-zip	sired when reinstating)	DATE OFFICERS AND DIR	ECTORS IN	Addition
agent. I ar SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Tamiliar with, and accept the obligation of registered agent OFFICERS AND PD DECOSMO, JOHN B 2178 MONTANA AVE NE ST PETERSBURG, FL 00000 STD DECOSMO, JUDITH M 2178 MONTANA AVE NE ST PETERSBURG, FL 00000	t and title if applicable (NOTE: D DIRECTORS DELETE	Registered Age  13.  1.1 TITLE  1.2 NAME  1.3 STREE  1.4 CITY-  2.1 TITLE  2.2 NAME  2.3 STREE  2.4 CITY  3.1 TITLE  3.2 NAME	et Address et Address et Address et Address	sired when reinstating)	DATE OFFICERS AND DIR	ECTORS IN	Addition
agent. I ar SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Traniliar with, and accept the obligation of familiar with, and accept the obligation of familiar with, and accept the obligation of familiar with a signature, typed or printed name of registered agent OFFICERS AND PD DECOSMO, JOHN B 2178 MONTANA AVE NE ST PETERSBURG, FL 00000 STD DECOSMO, JUDITH M 2178 MONTANA AVE NE ST PETERSBURG, FL 00000 VD VD KESLER, DAVID B	t and title if applicable (NOTE: D DIRECTORS DELETE	Registered Age  13.  1.1 TITLE  1.2 NAME  1.3 STREE  1.4 CITY-  2.1 TITLE  2.2 NAME  2.3 STREE  2.4 CITY  3.1 TITLE  3.2 NAME	et Address -st-zip	sired when reinstating)	DATE OFFICERS AND DIR	ECTORS IN	Addition
agent. I ar SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	Traniliar with, and accept the obligation of registered agent OFFICERS AND OFFICERS AND DECOSMO, JOHN B 2178 MONTANA AVE NE ST PETERSBURG, FL 00000 STD DECOSMO, JUDITH M 2178 MONTANA AVE NE ST PETERSBURG, FL 00000 VD KESLER, DAVID B 65 66TH ST SOUTH	t and title if applicable. (NOTE: D DIRECTORS D DELETE DELETE	Registered Age  13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY	et address -st-zip -st-address -st-zip -st-address -st-zip -st-zip	sired when reinstating)	DATE  FFICERS AND DIR  C	ECTORS IN ange	Addition  Addition
agent. I ar SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Traniliar with, and accept the obligation of familiar with, and accept the obligation of familiar with, and accept the obligation of familiar with a signature, typed or printed name of registered agent OFFICERS AND PD DECOSMO, JOHN B 2178 MONTANA AVE NE ST PETERSBURG, FL 00000 STD DECOSMO, JUDITH M 2178 MONTANA AVE NE ST PETERSBURG, FL 00000 VD VD KESLER, DAVID B	t and title if applicable (NOTE: D DIRECTORS DELETE	Registered Age  13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STREE	et address -st-zip -st-address -st-zip -st-address -st-zip -st-zip	sired when reinstating)	DATE  FFICERS AND DIR  C	ECTORS IN	Addition  Addition
agent. I ar SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Transliar with, and accept the obligation of familiar with, and accept the obligation of ficers and of fine translation. The street eigent of the street eigent eigen ei	t and title if applicable (NOTE:  D DIRECTORS  DELETE  DELETE	Registered Age  13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY	et Address -st-zip -st-address -st-zip -st-address -st-zip	ired when reinstating) ADDITIONS/CHANGES TO C	DATE  FFICERS AND DIR  C	ECTORS IN ange	Addition  Addition
agent. I ar SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Tamiliar with, and accept the obligation of familiar with, and accept the obligation of ficers. And OFFICERS AND DECOSMO, JOHN B 2178 MONTANA AVE NE ST PETERSBURG, FL 00000 STD DECOSMO, JUDITH M 2178 MONTANA AVE NE ST PETERSBURG, FL 00000 VD.  KESLER, DAVID B 65 66TH ST SOUTH ST PETERSBURG, FL 00000	t and title if applicable. (NOTE: D DIRECTORS D DELETE DELETE	Registered Age  13.  1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY 4.1 TITLE 4.2 NAME	et Address -st-zip -st-address -st-zip -st-address -st-zip	sired when reinstating)	DATE  FFICERS AND DIR  C	ECTORS IN ange	Addition  Addition
Agent. I ar SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	Tamiliar with, and accept the obligation of familiar with, and accept the obligation of ficers. And OFFICERS AND DECOSMO, JOHN B 2178 MONTANA AVE NE ST PETERSBURG, FL 00000 STD DECOSMO, JUDITH M 2178 MONTANA AVE NE ST PETERSBURG, FL 00000 VD.  KESLER, DAVID B 65 66TH ST SOUTH ST PETERSBURG, FL 00000	t and title if applicable (NOTE:  D DIRECTORS  DELETE  DELETE	Registered Age  13.  1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY 4.1 TITLE 4.2 NAME	et address	ired when reinstating) ADDITIONS/CHANGES TO C	DATE OFFICERS AND DIR	nange   hange	Addition  Addition  Addition
agent. I ar SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Tamiliar with, and accept the obligation of familiar with, and accept the obligation of ficers. And OFFICERS AND DECOSMO, JOHN B 2178 MONTANA AVE NE ST PETERSBURG, FL 00000 STD DECOSMO, JUDITH M 2178 MONTANA AVE NE ST PETERSBURG, FL 00000 VD.  KESLER, DAVID B 65 66TH ST SOUTH ST PETERSBURG, FL 00000	t and title if applicable (NOTE:  D DIRECTORS  DELETE  DELETE	Registered Age  13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY 4.1 TITLE 4.2 NAM 4.3 STREE 4.4 CITY- 5.1 TITLE	et address et address et address et address est-zip et address est-zip et address est-zip et address est-zip	ired when reinstating) ADDITIONS/CHANGES TO C	DATE OFFICERS AND DIR	nange   hange	Addition  Addition
Agent. I ar SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Tamiliar with, and accept the obligation of familiar with a conference of familiar w	ions of, Section 607.0505, Fig. 1 t and title if applicable. (NOTE: D DIRECTORS D DELETE DELETE DELETE DELETE	Registered Age  13.  1.1 TITLE 1.2 NAME 1.3 STREF 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREF 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STREF 3.4 CITY 4.1 TITLE 4.2 NAM 4.3 STREF 4.4 CITY-	et address et address et address et address est-zip et address est-zip et address est-zip et address est-zip	ired when reinstating) ADDITIONS/CHANGES TO C	DATE OFFICERS AND DIR	nange   hange	Addition  Addition  Addition
Agent. I ar SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME	Transliar with, and accept the obligate Signature, typed or printed name of registered agent OFFICERS AND DECOSMO, JOHN B 2178 MONTANA AVE NE ST PETERSBURG, FL 00000 STD DECOSMO, JUDITH M 2178 MONTANA AVE NE ST PETERSBURG, FL 00000 VD KESLER, DAVID B 65 66TH ST SOUTH ST PETERSBURG, FL 00000	ions of, Section 607.0505, Fig. 1 t and title if applicable. (NOTE: D DIRECTORS D DELETE DELETE DELETE DELETE	Registered Age  13.  1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY 4.1 TITLE 4.2 NAM 4.3 STREE 4.4 CITY 5.1 TITLE 5.2 NAME	et address et address et address et address est-zip et address est-zip et address est-zip et address est-zip	ADDITIONS/CHANGES TO C	DATE OFFICERS AND DIR	nange   hange	Addition  Addition  Addition
Agent. I ar SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Transliar with, and accept the obligate Signature, typed or printed name of registered agent OFFICERS AND DECOSMO, JOHN B 2178 MONTANA AVE NE ST PETERSBURG, FL 00000 STD DECOSMO, JUDITH M 2178 MONTANA AVE NE ST PETERSBURG, FL 00000 VD KESLER, DAVID B 65 66TH ST SOUTH ST PETERSBURG, FL 00000	ions of, Section 607.0505, Fig. 1 t and title if applicable. (NOTE: D DIRECTORS D DELETE DELETE DELETE DELETE	Registered Age  13.  1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY 4.1 TITLE 4.2 NAM 4.3 STREE 4.4 CITY 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY 5.3 STREE 5.4 CITY	ET ADDRESS ST-ZIP ET ADDRESS -ST-ZIP	ired when reinstating) ADDITIONS/CHANGES TO C	DATE OFFICERS AND DIR	nange	Addition  Addition  Addition  Addition
Agent. I ar SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Tamiliar with, and accept the obligation of Ficers And OFFICERS AND DECOSMO, JOHN B 2178 MONTANA AVE NE ST PETERSBURG, FL 00000 STD DECOSMO, JUDITH M 2178 MONTANA AVE NE ST PETERSBURG, FL 00000 VD KESLER, DAVID B 65 66TH ST SOUTH ST PETERSBURG, FL 00000	ions of, Section 607.0505, Fig. 1 t and title if applicable. (NOTE: D DIRECTORS D DELETE DELETE DELETE DELETE	Registered Age  13.  1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY 4.1 TITLE 4.2 NAM 4.3 STREE 4.4 CITY 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY 6.1 TITLE	ET ADDRESS ST-ZIP ET ADDRESS -ST-ZIP	ADDITIONS/CHANGES TO C	DATE OFFICERS AND DIR	ECTORS IN ange	Addition  Addition  Addition
Agent. I ar SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Tamiliar with, and accept the obligate Signature, typed or printed name of registered agent OFFICERS AND DECOSMO, JOHN B 2178 MONTANA AVE NE ST PETERSBURG, FL 00000 STD DECOSMO, JUDITH M 2178 MONTANA AVE NE ST PETERSBURG, FL 00000 VD.  KESLER, DAVID B 65 66TH ST SOUTH ST PETERSBURG, FL 00000	Inns of, Section 607.0305, Fig. 1  t and title if applicable (NOTE:  D DIRECTORS  DELETE  DELETE  DELETE  DELETE	Registered Age  13.  1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY 4.1 TITLE 4.2 NAM 4.3 STREE 4.4 CITY 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY 5.3 STREE 5.4 CITY	ET ADDRESS ST-ZIP ET ADDRESS -ST-ZIP	ADDITIONS/CHANGES TO C	DATE OFFICERS AND DIR	nange	Addition  Addition  Addition  Addition

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.