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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED Mar 08, 1999 8:00 am Secretary of State

03-08-1999 90077 040 ***150.00

| DOCUMENT # | 499961 |
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| 1 Corporation Name | 700001 |

FAT WILLIE'S FISH CAMP, INC.

| Participal Place of Euspress 187 FROMT STREET (AP 33594-2811) P.O. BOX 189 MURDO R 3359 | | | · | | | | | ÷ , | · · · · · · · · · · · · · · · · · · · | | | | | |
|--|---|---|----------------------------|----------------------------------|---|--|---|--|---------------------------------------|-----------------------------------|---------------------------|---------------------------|-------------------------------------|----------------------------------|
| P.O. BOX 189 VAUROC PL 33595 US US 3. Date Incorporated or Clusted Country QX/29/1976 QX | - Principal Plac | e of Business | Mailing | g Address | | | *** | | : : : : : : : : : : : : : : : : : : | | inin | | | |
| 2. Principal Prince of Business 2a. Malling Address 25 5. P165726 | P.O. BOX 189 VALRICO FL 33595 | | P.O. BO VALRIC | P.O. BOX 189 VALRICO FL 33595 | | | | 3. Date Inc | | | E IN THIS | SPACE | | |
| 2. Principal Prison of Business 2. A. Malling Address 2. 4. FEI Number | | | | | | | | | 03/29 | /1976 | | | | |
| Sulfe, Apt. 6, etc. Sulfe, Apt. 6, etc. Sulfe, Apt. 8, etc. | 2. Principal P | Place of Business | 2a. Ma | iling Address | | | | | | | | | - A | pplied For |
| Suite. Apt. #, etc. Suite. Apt. #, etc. Suite. Apt. #, etc. Suite. Apt. #, etc. Status Desired \$8.75 Additional fee Required Fee Required Fee Required Fee Required Fee Required Status Desired \$5.00 May Be Addition Addition Suite Suit | 21 | | 26 | • | | | | | 59-16 | 57726 | | | | |
| City & State | | #, etc. | Sui | ite, Apt. #, etc. | | | | | | | a also si | | \$8.75 | Additional |
| City & State 28 20 | 22 | | 27 | | | | | | 5. Certifica | te or status D | ESILAG | | Fee R | equired |
| Trust Fund Contribution | | te | Cit | y & State | | | | | 6. Election | Campaign Fi | nancing | | \$5.00 | May Be |
| 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 11. Pursuant to the provisions of Sections 807.0502 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 suthbridged by the corporation's board of directors. I hereby accept the appointment as registered agent, and the provisions of Sections 607.0508. Florida Statutes. The above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607.0508, Florida Statutes. The above-named corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0508, Florida Statutes. Statutes. The above-named corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0508, Florida Statutes. The above-named corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0508, Florida Statutes. The above-named corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0508, Florida Statutes. The above-named corporation's board of directors. I hereby accept the appointment as registered difference agent specified by the corporation's board of directors. I hereby accept the appointment as registered difference agent specified by the corporation's board directors. I hereby accept the purpose of changing its registered difference agent specified by the corporation's board directors. I hereby accept the purpose of changing its registered difference agent specified by the corporation's board directors. I hereby accept the purpose of changing its registered di | 23 | | 28 | | | | | | Trust Fu | und Contributi | on | | Added | to Fees |
| 9. Name and Address of Current Registered Agent WEILER, MICHAEL 1912 FRONT STREET VALRICO FL 33594 11. Pursuant to the provisions of Sections 807.0502 and 907.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing lis registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing lis registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE 30 OFFICERS AND DIRECTORS 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE PD OBLETE 11. TITLE PD OBLETE 11. TITLE PD OBLETE 11. STREET ADDRESS CNY-ST-2P VALRICO FL 33594 12. STREET ADDRESS CNY-ST-2P 13. STREET ADDRESS CNY-ST-2P 14. COTY-ST-2P 14. COTY-ST-2P 15. TITLE 15 | | _ · | Zip | ı | | ountry | | | 8. This cor | poration owe | the curre | ent year Int | | |
| WEILER, MICHAEL 1912 FRONT STREET VALRICO FL 33594 82 Street Address (P.O. Box Number is Not Acceptable) 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 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, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SQUARMAR, Specio primeriname of 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, are familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 1.13 TIME 12. OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 1.13 TIME 12. OFFICERS AND DIRECTORS IN 12 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. CITY ST. OFFICERS AND ST. OFFICERS AND DIRECTORS IN 12 15. TIME 15 | 24 | | | | 30 | | | | | | | | / | □No |
| WEILER, MICHAEL 1912 FRONT STREET 1912 FRONT ST. 13 STREET ADDRESS 14 STITULE | | 9. Name and Address of Cu | urrent Registere | d Agent | | - | | | 10. Name a | ind Address | of New R | egistered | Ágent | |
| 1912 FRONT STREET VALRICO FL 33594 13. | M/EII | LED MICHAEL | | | | 81 | Nan | 1e | | | v | | | 1 |
| WALRICO FL 33594 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 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, 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, and accept the obligations of, Section 607.6505. Florida Statutes. SIGNATURE Signature, toped or protect name of registered agent agent and site if applicable. (NOTE, Registered Agent signature required when remistating) DATE | | | | | | 82 | Stre | et Addre | ss (P.O. Box | Number is No | t Acceptal | ble) | | |
| ### City FL 85 Zip Code 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 lis 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 agent, a minister with, and accept the obligations of, Section 607.055, Florida Statutes. **SIGNATURE** 12. OFFICERS AND DIRECTORS* 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE PD OBJECT 1:TITLE OFFICERS AND DIRECTORS IN 12. TITLE PD OBJECT 1:TITLE OFFICERS AND DIRECTORS IN 13. STREET ADDRESS OLY-51-2P **TOPIC OFFICERS AND DIRECTORS IN 14.0Th's 1-2P **TOPIC OFFICERS AND DIRECTORS IN 12. **TOPIC OFFICERS A | | | | | | | <u> </u> | | | | | - | | |
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| The present to the provisions of Sections 607 (502) and 607,1508, Florida Statutes. The above-named corporation submits this statement for the purpose of changing lis 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 agent. I am familiar with, and accept the obligations of, Section 607 (505, Florida Statutes.) Signature, lipsed of privided name of registered agent | | | | | | 84 | City | | | | | | 85 Zip | Code |
| 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, 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, or both, and accept the obligations of, Section 607, 5055, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE PD D DELETE 11. TITLE PD D DELETE 11. TITLE 12. AME STREET ADDRESS CITY-ST-ZIP 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 14. CITY-ST-ZIP 14. CITY-ST-ZIP 14. CITY-ST-ZIP 14. CITY-ST-ZIP 14. CITY-ST-ZIP 14. CITY-ST-ZIP 15. TITLE 16. Change 17. Change 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 19. VALRICO FL 33594 14. CITY-ST-ZIP 14. CITY-ST-ZIP 14. CITY-ST-ZIP 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 16. CHANGE 17. ST-ZIP 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 19. CHANGE 19 | | | | | | | | | | | _ | | <u></u> | |
| SIGNATURE Signature, hyped or printed name of registered agent and life if applicable. (NOTE Registered Agent signature required when remittating) DATE | office or r | registered agent, or both, in the S | itate of Florida. S | Such change wa | is authorize | ed by t | the co | ed corpo rporation | ration submits 1's board of di | s this stateme rectors. I here | nt for the p by accept | purpose of t the appoi | changing its ntment as re | s registered egistered |
| 2. | 1 | in tanillar with, and accept the or | bilgations of our | J. 1017 007,0000, | . 101100 010 | utatos. | | | | | | | | |
| TITLE | | | | | | | | | | | | | | |
| NAME WEILER, MICHAEL 12 NAME 13 STREET ADDRESS 1912 FRONT ST. 13 STREET ADDRESS 14 GITY-ST-ZIP | SIGNATURE | Signature, typed or printed name of registere | nd agent and title if appl | licable. (N | OTE: Register | red Agen | nt signati | re required | when reinstating) | | | DATE | _ | |
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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 suppliemental 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 adactoment with an address with a other like empowered.

SIGNATURE:

URE AND HED OF PRINTED NAME OF SIGNAL OFFICER OR DIRECTOR

1/25/99

8/3.685.6208 Daylime Phone #