

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

FILED
Jan 27 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **515930** (6)
1. Corporation Name
A & N CORPORATION

Principal Place of Business 377 HIGHWAY 40 WEST PO BOX 878 INGLIS FL 34449 US	Mailing Address 377 HIGHWAY 40 WEST PO BOX 878 INGLIS FL 34449 US
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
10/06/1976

4. FEI Number 59-1170805	Applied For ☐ Not Applicable
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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 or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business 21 707 SW 19th Ave. Suite, Apt. #, etc.	2a. Mailing Address 26 707 SW 19th Ave. Suite, Apt. #, etc.
City & State 23 Williston, FL	City & State 28 Williston FL
Zip 24 32696	Country 25 Levy
Zip 29 32696	Country 30 Levy

9. Name and Address of Current Registered Agent

**VAUDREUIL, DAVID N.
377 HWY 40 W
PO BOX 878
INGLIS FL 34449**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable) 707 SW 19th Avenue
83
84 City Williston FL 85 Zip Code 32696

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

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

(NOTE: Registered Agent Signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VD	1.1 TITLE	☐ Change ☐ Addition
NAME	VAUDREUIL, NORMAN U	1.2 NAME	
STREET ADDRESS	FRAMLINGHAM ROAD	1.3 STREET ADDRESS	
CITY-ST-ZIP	INGLIS FL	1.4 CITY-ST-ZIP	
TITLE	PD	2.1 TITLE	☐ Change ☐ Addition
NAME	VAUDREUIL, DAVID N	2.2 NAME	
STREET ADDRESS	GENIE COURT	2.3 STREET ADDRESS	
CITY-ST-ZIP	YANKEETOWN FL	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	☐ Change ☐ Addition
NAME	VAUDREUIL, JUNE E.	3.2 NAME	
STREET ADDRESS	FRAMLINGHAM ROAD	3.3 STREET ADDRESS	
CITY-ST-ZIP	INGLIS FL	3.4 CITY-ST-ZIP	
TITLE	SD	4.1 TITLE	☐ Change ☐ Addition
NAME	VAUDREUIL, SUSAN H.	4.2 NAME	
STREET ADDRESS	GENIE COURT	4.3 STREET ADDRESS	
CITY-ST-ZIP	YANKEETOWN FL	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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.

CR2E034 (10/97)