

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jan 22 1996 8:00 am
Secretary of State

DOCUMENT # F61170 (9)

1. Corporation Name
TASTE OF CHICAGO, INC.

Principal Place of Business

% E GLENN TUCKER
923 N. COLLIER BLVD.
MARCO ISLAND FL 33937-2742

Mailing Address

297 N. COLLIER
MARCO ISLAND FL 33937-2742
US



2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

TUCKER, E GLENN
950 N. COLLIER BLVD.
SUITE 204
MARCO ISLAND FL 33937

3. Date Incorporated or Qualified
01/06/1982

3a. Date of Last Report
06/30/1995

4. FEI Number
59-2151077

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 has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 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 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 not state agent)

Date

12. OFFICERS AND DIRECTORS

T ☐ DELETE

NAME GREBENOR, MARILYN
STREET ADDRESS 180 SEAVIEW CT #702
CITY-ST-ZIP MARCO ISLD, FL 00000

V ☐ DELETE

NAME GREBENOR, JOSEPH
STREET ADDRESS 180 SEAVIEW CT #702
CITY-ST-ZIP MARCO ISLD, FL 00000

P ☐ DELETE

NAME THOMA, JOHN
STREET ADDRESS 961 COLLIER CT
CITY-ST-ZIP MARCO ISLD, FL 00000

S ☐ DELETE

NAME THOMA, PAT
STREET ADDRESS 961 COLLIER CT
CITY-ST-ZIP MARCO ISLD, FL 00000

☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

☐ 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

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE: *Marilyn Grebenor* MARILYN GREBENOR
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-16-96

941-394-1368

CR2E034 (12/95)