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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 1. Corporation Name F9400002783 (8)

SAXER BREWING COMPANY

FILED Feb 05 1998 8:00am Secretary of State



Principal Place of Business		Mailing Address				ı radıradı ilta radır grafir getiri detiri dölişi dölişi birili 1802; reriba İşli 4501		
5875 SW LAKEVIEW BLVD LAKE OSWEGO OR 87035		5875 SW LAKEVIEW BLVD LAKE OSWEGO OR 87035						
						DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified	ONOL	
						05/26/1994		
2. Principal P	lace of Business	2a. Mailing Address	·		•	4. FEI Number	Applied For	
21		26				93-1058249	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional	
22		27			· · · · · · · · · · · · · · · · · · ·	6. Cermicate of Status Desired	Fee Required	
City & State	0	City & State				6. Election Campaign Financing	\$5.00 May Be	
23 Zip	Country	28				Trust Fund Contribution	Added to Fees	
24	25	Zip (29)	30	untry		8. This corporation owes or has paid the cu Personal Property Tax due June 30.		
47	9, Name and Address of Curre		30	1		10. Name and Address of New Registered		
WE	BER, J EDWARD P.A.			81	Name	10, 114110 4110 11011 110 11011	Agont	
747 N WASHINGTON BLVD					<u> </u>	41 (0.0 D. N. (1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1		
	RASOTA FL 34236			82	Street Add	dress (P.O. Box Number is Not Acceptable)		
				83				
					0"			
				84	City	FL	85 Zip Code	
11. Pursuant I	to the provisions of Sections 607.050	02 and 607.1508, Florida St	atules, the a	above-	named cor	poration submits this statement for the purpose of tion's board of directors. I hereby accept the ap	of changing its registered	
agent. I a	m familiar with, and accept the oblig	ations of, Section 607.0505	, Florida Sta	eu by i itules.	ne corpora	tions board of directors. I hereby accept the ap	pointment as registered	
SIGNATURE								
 	Signature, typed or printed name of registered agr	ant and title if applicable.			signature requ	ired which reinstating) DATE		
TITLE	\$DC	DELETE	13.		— <u>1</u>	ADDITIONS/CHANGES TO OFFICERS AN	DIRECTORS IN 12 Change Addition	
NAME	GILBERT, KERRY S			IAME			□ cuanda □ voordor	
STREET ADDRESS	5875 SW LAKEVIEW BLVD			TREET AS	nnaree			
CITY-ST-ZIP	LAKE OSWEGO OR			ITY-SI-				
TITLE	PD	☐ DELETE 21T			EII		Change Addition	
NAME	GOEBEL, STEVEN C		2.2 N	IAME				
STREET ADDRESS	5875 SW LAKEVIEW BLVD		2.3 S	TREE1 AE	DDRESS			
CITY-ST-ZIP	LAKE OSWEGO OR		2.40	CITY - ST -	ZIP			
TITLE	D ' .	☐ DELETE	3.1 TI				Change Addition	
NAME	goebel, elizabeth m		3.2 N	AME	1			
STREET ADDRESS	5875 SW LAKEVIEW BLVD		3.3 S	treet ac	DORESS			
CITY-ST-ZIP	LAKE OSWEGO OR		3.4. 0	CITY-ST-	ZIP			
TITLE	0	DELETE	411	TLE			☐ Change ☐ Addition	
NAME	GILBERT, LARRY		4. 2 N	IAME				
STREET ADDRESS	5875 SW LAKEVIEW BLVD		4.3 \$	TREET AD	DRESS			
CITY-ST-ZIP	LAKE OSWEGO OR	Paters		TY-ST-	ZIP		·	
TITLE		DELETE	5.1 T				☐ Change ☐ Addition	
NAME			5.2 N					
STREET ADDRESS				TREET AD				
CITY-ST-ZIP		☐ DELETE		11Y-S1-7	ZIP			
TITLE		□ Delete	61 11				Change Addition	
NAME			6.2 N/					
STREET ADDRESS				IREET AD				
CITY-ST-ZIP			6.4 CI	TY - ST - 2	ZIP I			

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.