

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED

Oct 07 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # F95000005268 (6)
1. Corporation Name

CRABBY BILL'S RESTAURANTS, INC.



Principal Place of Business

101 PHILIPPE PKWY
SAFETY HARBOR FL 34695

Mailing Address

101 PHILIPPE PKWY
SAFETY HARBOR FL 34695
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/11/1995

4. FEI Number

59-3330216

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$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 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

9. Name and Address of Current Registered Agent

SMITH, DARRELL C
101 KENNEDY BLVD
SUITE 2800
TAMPA FL 33602

10. Name and Address of New Registered Agent

81 Name

GERALD C. PARKER

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

101 PHILIPPE PARKWAY, STE. 300

83

84 City

SAFETY HARBOR

FL

85 Zip Code

34695

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

9/25/98

12. OFFICERS AND DIRECTORS

TITLE DC
NAME GEIST, ROBERT A
STREET ADDRESS 101 PHILIPPE PKWY #200
CITY-ST-ZIP SAFETY HARBOR FL

DELETE

TITLE DP
NAME ROACH, DALE W
STREET ADDRESS 101 PHILIPPE PKWY #200
CITY-ST-ZIP SAFETY HARBOR FL

DELETE

TITLE VST
NAME HUMBOLDT, JAMES R
STREET ADDRESS 101 PHILIPPE PKWY #200
CITY-ST-ZIP SAFETY HARBOR FL

DELETE

TITLE V
NAME GANDY, JAMES C
STREET ADDRESS 101 PHILIPPE PKWY #200
CITY-ST-ZIP SAFETY HARBOR FL

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE CHAIRMAN / CEO
1.2 NAME GERALD C. PARKER
1.3 STREET ADDRESS 101 PHILIPPE PARKWAY, STE. 300
1.4 CITY-ST-ZIP SAFETY HARBOR, FL 34695

Change Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

Change Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

Change Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

Change Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

Change Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

Change 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.

SIGNATURE:

9/25/98 222 669 MVA

CR2E034 (5/98)