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 # F9700001412 (2)

CLAY BREWER ENTERPRISES, INC.

Principal Place of Business

Mailing Address

FILED May 04 1998 8:00am Secretary of State



370 LAUREL WOODS DR. DANVILLE VA 24540		370 Laurel Woods Dr. Danville va 24540			•	
					DO NOT WRITE IN	THIS SPACE
					 Date Incorporated or Qualified 03/19/1997 	
	ace of Business	2a. Mailing Address	4.0.4		4. FEI Number	Applied For
21 9995	E. ROAMO DR.		AUAW	OOR.	62-1514692	Not Applicable
Suite, Apt. I	♥, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		Cily & State		6. Election Campaign Financing	\$5.00 May Be	
TAMPA, FL		28 TAMPA, FL		Treat rails contribution	Added to Fees	
Zip	Country HILLS BORD UCA	7ip	Country 30 HILLSOALOV C-14		8. This corporation owes or has paid	
24 3361°	[25]	23 3 2 0 1	30 ///	XXXXX V-14	Personal Property Tax due June 30 10. Name and Address of New Regis	
	9. Name and Address of Current	Hegisterea Agent		I Name	10. Name and Address of New Regis	Kered Agent
DICHER, CERTON C						
	5 ADAMO DR.		8:	Street Add	ress (P.O. Box Number is Not Acceptable)	
TAN	IPA FL 33619		8:			
			6.	'		
			84	City		85 Zip Code
				<u> </u>		FL C Z G G G G G G G G G
11. Pursuant to the provisions of Sections 607.05.02 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 Storage by red or printed page of registered parent and bits of approaches (NOT): Registered Agent signature required when reinstating) DATE						
12.	Signature, typed or printed name of registered agent OFFICERS AND		13.	gent alguature requ	ADDITIONS/CHANGES TO OFFICE	
TITLE	PTD	DELETE	1.1 TITLE			Change Addition
NAME	BREWER, CLAYTON D		1.2 NAME			•
STREET ADDRESS	370 LAUREL WOODS DR		1.3 STREET ADDRESS			i
CITY-ST-ZIP	DANVILLE VA					
TITLE	SD	DELETE	2 1 TITLE			Change Addition
NAME	B REWER, LINDA M		22 NAME 23 STREET ADDRESS 2 4 CITY-ST-ZIP			
STREET ADDRESS	370 LAUREL WOODS DR					Ì
CITY-\$T-ZIP	DANVILLE VA					
TITLE		DELETE	3 1 111LF			Change Addition
NAME			3.2 NAME			
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP			3.4. CITY			
TITLE	DELETE		4.1 TITLE			Change Addition
NAME	_		4.2 NAM	E		
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP			4.4 CITY			
TITLE		DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAMI		1.	
STREET ADDRESS			5.3 STRE	ET ADDRESS	· (514	
CITY-ST-ZIP			5.4 CITY	ST-ZIP	70-11	
TITLE	DE		6.1 TITLE		400000-	Change Addition
NAME			6.2 NAM		-05/05/00_0:0	1574
STREET ADDRESS			6.3 STRE	E1 ADDRESS	40000251 -05/05/980111 ***150.00	5049
CITY - ST - 7IP	6.4 (6.4 CITY	S1-ZIP		
14 I hereby c	ertify that the information supplied wit	h this filing does not qualify fo	or the exem	ntion stated in	Section 119.07(3)(i), Florida Statutes. I fu	rther 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.						