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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9700003687 (7)

FILED Mar 10 1998 8:00am Secretary of State

BIG FO	OT, INC.							
Principal Place	e of Businoss	Mailing Address				E YOOKIOO TUUK INTIK URDIA ODIIN QOIN OONIN DOLA	99500 IUN BINET IN	
103 NORTH CEDAR CREEK DRIVE		103 NORTH CEDAR CREEK DRIVE						
CORDELE GA 31015		CORDELE GA 31015		Ì				
					- }	DO NOT WRITE IN TH	IIS SPACE	
					1	3. Date Incorporated or Qualified		
2. Principal P	lace of Business	2a. Mailing Address				07/15/1997 4. FEI Number		oplied For
21		26				58-2325004	Not Applicable	
Suite, Apt. #, etc		Suite, Apt. #, etc.					S8.75 Additional	
22		27				Certificate of Status Desired		equired
City & State		City & State				6. Election Campaign Financing	\$5.00	May Be
23		28				Trust Fund Contribution		to Fees
Zip	Country	Zipi	Coun	try		8. This corporation owes or has paid the		
24	25]	29	30			Personal Property Tax due June 30.		No
	9. Name and Address of Curren	nt Registered Agent		1 Name		10. Name and Address of New Register	ed Agent	
	OMAS, SARA G		'	Name	,			
	LIAMS, COX, WEIDNER & COX		1	2 Street	Addres	s (P.O. Box Number is Not Acceptable)		
	37 LAFAYETTE STREET	•		13				
MA	RIANNA FL 32446			~				
			[4	City			85 Zip	Code
11 Purcuant	to the provisions of Sections 607 0/0	2 and 607 1508 Florida Statu	los the ahi	We-named	d corner			ts registered
office or re	egistered agent, or both, in the State	of Horida, Such change was	authorized	by the coi	rporation	ation submits this statement for the purpos n's board of directors. I hereby accept the	appointment as	registered
	m татынаг w ith, апо ассерт иле обліді	arons of, Section 607,0505, Fi	orina Siaiu	ies.				1
SIGNATURE	Signature, typed or printed hand of registered ag-	on and title if applicable (NO	F Registered	Agent signatur	re regulred	when reinstating) DAT	E	
12.	OFFICERS AN		13.			ADDITIONS/CHANGES TO OFFICERS	AND DIRECTOR	RS IN 12
THLE	PDT DELETE		11 TITL	11 TITLE			Change	Addition
NAME	HALL, ROY P JR		1.2 NAN	lέ				;
STREET ADDRESS	103 NORTH CEDAR CREEK D	DRIVE	1.3 STR	EET ADDRESS				Įį.
CITY+ST+ZIP	CORDELE GA 31015		1.4 C(T)	- \$1 - 7/P				
TITLE	DVS	[_] DELETE	2.1 TITL	E	1		Change	Addition (
NAME	CARTER, HAROLD L SR		2.2 NAN					
STREET ADDRESS	108 CEDAR LAKE CIRCLE		T.	ET ADDRESS		* * * * * * * * * * * * * * * * * * * *		
CITY-ST-ZIP	CORDELE GA 31015	DELETE		Y-ST-ZIP			Channa	Addition
TITLE		□ MILLIE	3.1 1110		1		Change	Addition
NAME			3.2 NAM		1			
STREET ADDRESS				EET ADDRESS				
CAY-ST-ZIP TITLE		DELETE	3.4. CH	r-ST-ZIP F	+-		Change	Addition
NAME		Em vaccin	4. 2 NAI				C	
STREET ADDRESS				ET ADDRESS				
CITY-ST-ZIP			1	- \$T- ZIP	}			
TITLE		DELETE	5 1 TITL		 		Change	Addition
NAME			5.2 NAN	IE				
STREET ADDRESS				EET ADDRESS	1			
CITY-ST-ZIP			5.4 CITY	- ST-ZIP				
TITLE		DELETE	6 1 TITL	E	$T^{}$		Change	☐ Addition
NAME			62 NAM	IÉ	[
STREET ADDRESS			6.3 STA	EET ADDRESS	1			
CITY-ST-ZIP			6.4 CITY	-ST-ZIP				

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 suppliemental 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.