2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED Feb 09, 2007 08:00 AM Secretary of State DOCUMENT # G15968 1. Entity Namo A.B. COOK JR. SEAFOOD, INC. Principal Place of Business Mailing Address 1523 HIGHLAND ST. 1523 HIGHLAND ST P O BOX 146 P.O. BOX 16146 FERNANDINA BCH. FL 32034 FERNANDINA BEACH FL 32034 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State City & State Applied For 4. FEI Number 59-2239385 Not Applicable Zlp Country Zip Country \$8.75 Additional 5. Certificate of Status Dosired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent COOK, III, A B Street Address (P.O. Box Number is Not Acceptable) 1523 HIGHLAND ST. FERNANDINA BEACH FL 32034 Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PTD ☐ Change ШЕ THE Addition Delete U00000629720 02/19/07-80011-014 150.00 COOK, III, A B NAME NAMI 1523 HIGHLAND STREET STREET ADDRESS STREET ADDRESS FERNANDINA BEACH FL 32034 CITY-ST 7(P CHY-SI-ZIP TITLE ☐ Driele ☐ Change Addition COOK, PATRICIA E NAME 1523 HIGHLAND STREET STREET ADDRESS STREET ADDRESS FERNANDINA BEACH FL 32034 CITY-SI-7IP CITY-ST-7IP CEO Delete ☐ Change Addition HILE TITLE NAMI COOK, ALFRED B IV NAME STREET ADDRESS PO BOX 16146 STREET ADDRESS FERNANDINA BEACH FL 32035 CHY-SI-ZIP CITY-ST-ZIP HILL ☐ Defete Change Addition NAME NAME STREET AODRESS STREET ADDRESS CITY-ST-ZIP CHY-SI-7IP THEFT ☐ Delete 1011 ☐ Change Addition NAME NAMI STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY: \$1-7IP Change ☐ Addition HILE Delete HILE. NAME NAMI STREET ADDRESS STREET ADDRESS CITY-SI-ZIP CITY-ST-7IP I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119. Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.