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

PROFIT CORPORATION ANNUAL REPORT

1998



ELORIDA DEPARTMENT DE STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # H27785

(5)

POTTS HOT DOGS, INC.

cipal Place of Business	Mailing Address
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7149 COLUMBIA CIRCLE	7149 COLUMBIA CIRCLE
FT. MYERS FL 33908	FT, MYERS FL 33908

FILED Apr 17 1998 8:00am Secretary of State

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/29/1984 2. Principal Place of Business 2a. Mailing Address 4. FEI Numbe Applied For 59-2563286 21 26 Not Applicable Suite, Apt. #. etc. Suite Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Regulred 27 City & State City & State 6. Election Campaign Financing \$5,00 May Be 23 Trust Fund Contribution 28 Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 POTTS, MICHAEL A 7141 COLUMBIA CIRCLE 82 Street Address (P.O. Box Number is Not Acceptable) FORT MYERS FL 33908 83 84 85 Zip Code 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 little if applicable (NOTE: Registered Agent signature required when reinstating) (10/97 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 1.1 TITLE POTTS, MICHAEL A. 1.2 NAME NAME 7141 COLUMBIA CIR STREET ADDRESS 1.3 STREET ADDRESS FT. MYERS FL 33908 CITY-ST-Z#P 1.4 CITY-ST-ZIP DELETE Change Addition 2.1 TITLE NAME POTTS, JAMES R. 2.2 NAME decoared 826 LK MCGREGOR RD. STREET ADDRESS 2.3 STREET ADDRESS FT. MYERS FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETÉ TITLE 3.1 TITLE Change Addition POTTS, WILLIAM R., JR NAME 3.2 NAME **18 WARREN COURT** STREET ADDRESS 3.3 STREET ADDRESS **SPARTA NJ** CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change TITLE **VPS** 4.1 TITLE Addition NAME POTTS, JEFFREY L. 4. 2 NAME 114 W. FAIRVIEW STREET STREET ADDRESS 4.3 STREET ADDRESS **BETHLEHEM PA** CITY-ST-ZIP 4.4 CITY-ST-ZIP Change DELETE Addition TITLE 5.1 TITLE POTTS. EVELYN R. NAME 5.2 NAME 7149 COLUMBIA CIRCLE STREET ADDRESS 5.3 STREET ADDRESS FT. MYERS FL CITY-ST-ZIP 54 CITY-ST-ZIP Addition DELETE Change TITLE 6.1 TiTL€ NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

6.4 CITY-ST-ZIP
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 of 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 was an address.