05-04-1999 90103 018 ***150.00

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H37028

1. Corporation Name

BRITTON'S PLUS, INC.

			•					
Principal Place of Business Mailing Address								
1190 E VENICE VENICE FL 342 US		1190 E VENICE AVE VENICE FL 34292 US	VENICE FL 34292		DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed 01/08/1985		
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number	Ap	plied For
21		26				59-2519488	No	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired	\$8.75 A	Additional quired
22 City & State	, "	City & State				6. Election Campaign Financing	\$5.00	May Ro
23	-	28				Trust Fund Contribution	Added to	
Zip	Country	Zip	Cou	ntry	•	8. This corporation owes the current year I		
24	25		30			Personal Property Tax.	Yes	□No
	9. Name and Address of Currer	nt Registered Agent		•	I	10. Name and Address of New Registere	d Agent	
port	TON, RONALD T.			81	Name			
1190 E VENICE AVE				82	Street Addre	ess (P.O. Box Number is Not Acceptable)		
VENICE FL 34292						,		
AEIA	IUE FL 34292			83				.
				84	City	F	85 Zip C	Code
office òr r agent. I a	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obligation	of Florida, Such change was aut	thorized	hν	the corporation	oration submits this statement for the purpose on's board of directors. I hereby accept the app	of changing its ointment as rec	registered gistered
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable. (NOTE: F	Registered	Agen	nt signature required	when reinstating) DATE		
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS A		
TITLE	PD	☐ DELETE	1.1 TIT	Œ			☐ Change	Addition
NAME	BRITTON, JOHN		1.2 NA	ME				
STREET ADDRESS	1190 E VENICE AVE		1.3 ST	REET	TADDRESS			
CITY-ST-ZIP	VENICE FL		1.4 CI	ry-s	T-ZIP			
TITLE	D □ DELETE 2.		2.1 TIT	lΕ			Change	☐ Addition
NAME	Britton, todd		2.2 NAME					
STREET ADDRESS	1190 E VENICE AVE		2.3 STREET ADI		T ADDRESS			
CITY-ST-ZIP	VENICE FL		2. 4 CITY-5		ST-ZIP			
TITLE		☐ DELETE	3.1 TIT	LE		•	☐ Change	☐ Addition
NAME			3.2 NA	ME				
STREET ADDRESS			3.3 ST	REE	TADORESS			
CITY-ST-ZIP			3.4. CI	TY-S	ST-ZIP			
TITLE		☐ DELETE	4.1 TIT	LE			Change	☐ Addition
NAME			4. 2 N	AME				Ì
STREET ADDRESS			4.3 ST	REET	TADORESS			- (

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 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, with all other like empowered.

4.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

5.1 TITLE

5.2 NAME 5.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRÉSS

CITY-ST-ZIP

NAME

TITLE

☐ DELETE

☐ DELETE

4/29/99

(941) 485-3336

☐ Change

☐ Change



☐ Addition

Addition