

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 10 AM 9:12

DOCUMENT # H43206

(2)

1. Corporation Name

DUFFY'S DRAFT HOUSE, INC.

Principal Place of Business

Mailing Address

C/O ROBERT H. GREGORY, JR.
9477-9479 STATE ROAD, ALTERNATE A1A
LAKE PARK FL 33410

C/O ROBERT H. GREGORY, JR.
9477-9479 STATE ROAD, ALTERNATE A1A
LAKE PARK FL 33410

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 02/18/1985	3a. Date of Last Report 01/25/1994
4. FBI Number 59-2508448	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business 21 3944 Florida Blvd. Suite, Apt. #, etc. 22 City & State 23 Palm Beach Gardens FL Zip 24 33410	2a. Mailing Address 25 3944 Florida Blvd. Suite, Apt. #, etc. 26 City & State 27 Palm Beach Gardens FL Zip 28 33410
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9. Name and Address of Current Registered Agent

GREGORY, ROBERT H., JR.
9477-9479 STATE ROAD
ALTERNATE A1A
LAKE PARK FL 33410

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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 title if applicable.

(NOTE: Registered Agent signature required when remaining)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	☐ Change ☐ Addition
NAME	COURNOYER, STEVE	1.2 NAME	
STREET ADDRESS	9477-9479 STATE RD.	1.3 STREET ADDRESS	
CITY-ST-ZIP	LAKE PARK FL	1.4 CITY-ST-ZIP	
TITLE	VPS	2.1 TITLE	☐ Change ☐ Addition
NAME	GREGORY, ROBERT H., JR.	2.2 NAME	
STREET ADDRESS	9477-9479 STATE RD.	2.3 STREET ADDRESS	
CITY-ST-ZIP	LAKE PARK FL	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 its 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 in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-6-95

407-775-7664