

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

FILED  
Jan 29 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # J26711

(8)

1. Corporation Name

WESTERN SIZZLIN OF CRESTVIEW, INC.

Principal Place of Business

2350 S. FERDON BLVD  
CRESTVIEW FL 32536  
US

Mailing Address

638 N. FERDON BLVD  
CRESTVIEW FL 32536-2165  
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

30

3. Date Incorporated or Qualified

07/30/1986

3a. Date of Last Report

05/21/1996

4. FEI Number

59-2719152

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

9. Name and Address of Current Registered Agent

SHEFFIELD, DALTON  
638 N FERDON BLVD  
CRESTVIEW, FL 32536  
FL

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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 title (applicable)

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY- ST- ZIP ☐ DELETE

P  
JONES, JACK  
RT 1 BOX 147  
WESTVILLE FL

TITLE NAME STREET ADDRESS CITY- ST- ZIP ☐ DELETE

ST  
SHEFFIELD, DALTON  
638 N FERDON BLVD  
CRESTVIEW, FL

TITLE NAME STREET ADDRESS CITY- ST- ZIP ☐ DELETE

V  
JOHNSON, ALBERT  
210 N WAUKESHA ST.  
BONIFAY FL

TITLE NAME STREET ADDRESS CITY- ST- ZIP ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE NAME STREET ADDRESS CITY- ST- ZIP ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE NAME STREET ADDRESS CITY- ST- ZIP ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY- ST- ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY- ST- ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY- ST- ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY- ST- ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY- ST- ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY- ST- ZIP

14. I do 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.

SIGNATURE:

D. Dalton Sheffield

1/23/97

(904)682-0555

CP2E034 (9/96)