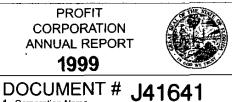
## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999

1. Corporation Name



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## May 10, 1999 8:00 am Secretary of State

05-10-1999 90068 030 \*\*\*158.75

FLAKY, INC. Principal Place of Business Mailing Address P. O. BOX 1322 2727 HWY. 441 SE OKEECHOBEE FL 34974 OKEECHOBEE FL 34973 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 11/12/1986 2a. Mailing Address 4. FEI Number Applied For 2. Principal Place of Business **59-2778000** Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State \$5.00 May Be City & State Election Campaign Financing Added to Fees Trust Fund Contribution 23 28 Zip Country Zip Country 8. This corporation owes the current year Intangible **⊠**No Personal Property Tax. 30 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 JOE ROWLETT 82 Street Address (P.O. Box Number is Not Acceptable) 9751 HWY 78. W OKEECHOBEE FL 34974 83 85 Zip Code 84 City 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, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13 12. ☐ DELETE 1 1 TITLE Change ☐ Addition TITLE ROWLETT, JOE 12 NAME NAME 9751 HWY. 78, W. 1.3 STREET ADDRESS STREET ADDRESS OKEECHOBEE FL 1.4 City-St-ZiP CITY-ST-ZIP Addition ☐ Change ☐ DELETE TITLE 2.1 TITLE ROWLETT, DOROTHY 2.2 NAME NAME 9751 HWY. 78, W. STREET ADDRESS 2.3 STREET ADDRESS OKEECHOBEE FL 2.4 CITY-ST-ZIP CITY-ST-ZIF [] Change ☐ Addition DELETE 3.1 TITLE TITLE NAME 3.2 NAME

6.4 CITY-ST-ZIP 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.

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

3.4. CITY-ST-ZIP

4.1 TITLE

4. 2 NAME

5.1 TITLE 5.2 NAME

6.1 TITLE

62 NAME

□ DELETE

☐ DELETE

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SIGNATURE:

STREET ADDRESS

STREET ADORESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

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TITLE

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