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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

1997

DOCUMENT # J72455 (5) 1. Corporation Name FLUFFY, INC. OF BRADENTON, FLORIDA  Principal Place of Business 2239 14 ST W BRADENTON FL 34205  Mailing Address 2239 14 ST W BRADENTON FL 34205							
					3. Date Incorporated or Qualified 05/13/1987	3a, Date of La 03/21/199	
——	Place of Business	2a. Mailing Addre	ess		4. FÉI Number 59-2814746		Applied For
Suite, Apt.	. #, etc.	26 Suite, Apt. #,	etc.		5. Certificate of Status Desired		Not Applicable 75 Additional Required
City & Stat	te	City & State		<u></u>	6. Election Campaign Financing	<del></del>	.00 May Be
<b>23</b> Zip	Country	<b>28</b> Zip		ountry	Trust Fund Contribution  8. This corporation has liability for it		ded to Fees der s. 199,032.
24	25	29	30		Ftorida Statutes	Yes No	
	9. Name and Address of Cur	rent Registered Agent			10. Name and Address of New Re	gistered Agent	
	YKINS, JOHN D			81 Name			
	3 W. MANATEE AVE. NDENTON FL 34206		82 Street Ad		ress (P.O. Box Number is Not Acceptable)		
0.0				83			
				84 City		FL 85	Zip Code
11. Pursuant	to the provisions of Sections 607.0	0502 and 607,1508, Florid	a Statutes, the	above-named cor	poration submits this statement for the p		na its registered
agent l'a	am familiar with, and accept the ob-			tatutes.	poration submits this statement for the pation's board of directors. I hereby accept		it as registered
12.	AFCIACO A				HIGH MURIT RELIEFSTRICTS	DATE	
		AND DIRECTORS	13	).	ADDITIONS/CHANGES TO OFFIC		TORS IN 12
TITLE	( PD	AND DIRECTORS DEL		TITLE			
NAME	PD Kennedy, Laura ann		LETE 1.7	TITLE		ERS AND DIREC	
NAME STREET ADDRESS	PD KENNEDY, LAURA ANN 2206-41ST ST EAST		LETE 1.:	NAME STREET ADDRESS		ERS AND DIREC	
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Table in deathy carrier in mornia mornia supplied with this limit does not qualify to the exemption stated in Section 119.07(3)(f), Florida Statutes. I furner carrier 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.

FILED

May 01 1997 8:00am

Secretary of State