**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## **DOCUMENT # K13030**

1. Corporation Name

THE WEDDING RING STORE, INC.

Princip	pal l	Place	of	Business

% PHYLLIS S. GANN

Mailing Address

% PHYLLIS S. GANN

## Apr 07, 1999 8:00 am Secretary of State

04-07-1999 90017 050 \*\*\*150.00



6100-B W. FAIRFIELD DR PENSACOLA FL 32506		6100-B W. FAIRFIELD DR PENSACOLA FL 32506		DO NOT WRITE IN THIS SPACE				
renoncoen re	, desco	1 210/1002/112 02000		3. Date Incorporated or Qualifed 01/22/1988				
2 Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For			
	NALD E. GANN	26 % RONALD E	GANN	59-2865670	Not Applicable			
Suite, Apt.		Suite, Apt. #, etc.			\$8.75 Additional			
	B FAIRFIELD DR	27 6100-8 FAIRF	ifld Dir	5Certifcate of Status Desired	Fee Required			
City & State	9 '	City & State	FL	6. Election Campaign Financing	\$5.00 May Be			
	ACOLA FL	20 3 -		Trust Fund Contribution	Added to Fees			
Zip 325	706 Es Country USA	Zip 32.506 30	Country USA	This corporation owes the current year Intangence Personal Property Tax.	Yes □No			
	9. Name and Address of Curren	t Registered Agent		10. Name and Address of New Registered Ag	ent			
			81 Name	RONALD E. GANN				
	N, PHYLLIS S.		82 Street Address (P.O. Box Number is Not Acceptable)					
	B W. FAIRFIELD DR			6100-8 W. FAIRFIELD DR				
PHN	SACOŁA FL 32506		83	•				
			84 City	2	85 Zip Code			
				ENSAGLA FL	32506 i			
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes, the	he above-named corp	oration submits this statement for the purpose of chapn's board of directors. I hereby accept the appointment	anging its registered   rent as registered			
onice or n	ngistered agent, or both, in the State of the obligation of the obligation in the state of the obligation of the obligat	tions of, Section 607.0505, Florida	Statutes A	_				
SIGNATURE	RONALD E. GI		malch E.	Dann				
SIGNATURE	Signature, typed or printed name of registered agen	nt and title if applicable. (NOTE: Regis	stered Agent signature require		DIDECTORS IN 42			
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND	Change Addition			
TITLE	DP	, ,	1.1 TILE <b>D</b>	P Zanini	d cisaline 1 3 Addition			
NAME	GANN, PHYLLIS S.		1,2 NAME	ENSACULA, FL 32506				
STREET ADDRESS	6100-B W. FAIRFIELD DR		13 STREET ADDRESS	100-0 11111 51 32506				
CITY-ST-ZIP	PENSACOLA FL			ENSACELA, PL 32300	Change Addition			
TITLE		_	2.1 TITLE	L				
NAME			2.2 NAME					
STREET ADDRESS			2.3 STREET ADDRESS					
CITY-ST-ZIP			2.4 CITY-ST-ZIP		7 Channel G Addition			
TITLE		☐ DELETE	3.1 TITLE	L	Change			
NAME			3.2 NAME					
STREET ADDRESS			3.3 STREET ADDRESS		'			
CITY-ST-ZIP			3.4. CITY-ST-ZIP		Observe Addition			
TITLE		☐ DELETE	4,1 TITLE	L	Change Addition			
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREET ADDRESS	•				
CITY-ST-ZIP			4.4 CITY-ST-ZIP		7.05			
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		<u>l</u>	6.3 STREET ADDRESS					
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 chapted, or on an attachment with an address, with all other like empowered.

SIGNATURE: