Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90021 044 ***150.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # 12

| DOCUMENT # K77251 | | | | 1. |
|---|--|------------------------------------|----------------------------------|--|
| 1. Corporation Name VILLAGE SQUARE RESTAURANT, INC. | | | | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ |
| VILLAGE | SQUARE RESTAURANT, IN | 10. | | I KARRADIN ANY KARIN LAGIA KARALANTA WAN BIRAN ANTAL AND ANTAL ANTAL ANTAL ANTAL ANTAL ANTAL ANTAL ANTAL A |
| | | | | |
| Principal Place | a of Business | Mailing Address | | i indivitii dir index radia (700) dixad mian aran aran dian asam asam asam asam i |
| • | | 301 WEST SOUTH PARK STR | EFT | |
| | | OKEECHOBEE FL 34972-4162 | | DO NOT WORTE IN THE CRACE |
| | | | | DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified |
| | | | | |
| | | 2a. Mailing Address | | 04/03/1989 |
| , | lace of Business | <u> </u> | | 65-0113811 Not Applicable |
| Suite, Apt. | # atr | Suite, Apt. #, etc. | | \$8,75 Additional |
| | m, 010. | 27 | | 5. Certificate of Status Desired Fee Required |
| City & State | | City & State | | 6. Election Campaign Financing \$5.00 May Be |
| 23 | | 28 | | Trust Fund Contribution Added to Fees |
| Zip | Country | Zip | Country | 8. This corporation owes the current year Intangible |
| 24 | 25 | 29 30 | 0 | Personal Property Tax. Yes No |
| | 9. Name and Address of Curren | t Registered Agent | | 10. Name and Address of New Registered Agent |
| | | | 81 Name | Benjamin J. Purvis |
| BROWN, JANICE G. | | | 82 Street | Address (P.O. Box Number is Not Acceptable) |
| 1875 S.E. 4TH STREET | | <u> </u> 235 | 35 5W 28 St Hat # 40 H | |
| OKE | ECHOBEE FL 34974 | | 83 | · |
| | | | 84 City | Keechohee FL 85 Zip Code 4 |
| | | | | |
| office OF F | existered exect or both in the State (| or Pionda - Such chande was autr | יטוט פווי עט ספונוטע | corporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered |
| agent. I a | familiar with, and accept the obligat | tions of, Seption 607.0505, Florid | a Statutes. | 77 11 2 11-92 |
| SIGNATURE | Denaum tur | 3 Cenjanin | TUTUI Senture n | PIESICENT DEALER DATE |
| 12. | Signature, types of printed name at registered agen OFFICERS AN | | 13. | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 President / Director Change XI Addition Denjamin J. Purvis 2355 Swa8st GOA Oxeechobee, FL 34974 |
| TITLE | PSTD | Ø D€LETE | 1.1 TITLE | President/Director Change XAddition = |
| NAME | BROWN, JANICE G | , , | 1.2 NAME | Benjamin J. Purris |
| STREET ADDRESS | 1875 S.E. 4TH STREET | | 1.3 STREET ADDRESS | 2355 SW 285+ 60A |
| CITY-ST-ZIP | OKEECHOBEE FL 34974 | | 1.4 CITY+ST-ZIP | oxeechobee, FL 34974 |
| TITLE | | ☐ DELETE | 2.1 TILE | Secretary / Treasurer/ Director |
| NAME | | | 22NAME | Gentry L. Purvis |
| STREET ADDRESS | | | 2.3 STREET ADDRESS | 2355 SW 283+ 60A |
| CITY - ST - ZIP | | , | 2. 4 CITY-ST-ZIP | Okeechobee, FL 34974 |
| TIFLE | | ☐ DELETE | 3.1 TITLE | Change Addition |
| NAME | | | 3.2 NAME | |
| STREET ADDRESS | | | 3.3 STREET ADDRESS | |
| CITY-ST-ZIP | | | 3.4. CITY-ST-ZIP | · Change Addition |
| TITLE | | DELETE = | 4,1 TITLE = - | · Change Addition |
| NAME | | | 4. 2 NAME | |
| STREET ADORESS | | | 4.3 STREET ADDRESS | • |
| CITY-ST-ZIP | | C) DCI CTC | 4.4 C/TY-ST-ZIP | ☐ Change ☐ Addition |
| HILE | | ☐ DELETE | 5.1 TITLE 5.2 NAME | |
| NAME | | | 5.2 NAVIIC 5.3 STREET ADDRESS | ' 1 |
| STREET ADDRESS | | | 54 CITY-ST-ZIP | |
| CITY-ST-ZIP | | ☐ DELETE | 6.1 TITLE | ☐ Change ☐ Addition |
| TITLE | | | 62 NAME | |
| NAME STREET ADDRESS | | | 6.3 STREET ADDRESS | |
| | | | | |

14. 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 eath; 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 shanged, or on an attachment with an address, with all other than empowered.

SIGNATURE:

Benjamin Puris 1-8-49