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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # K99282

(1)

1. Corporation Name

YANKEE INVESTMENTS, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT

96-97
A. Alan
3/27/97



Principal Place of Business

Mailing Address

7571 RIDGE ROAD
SEMINOLE FL 34642

7571 RIDGE ROAD
SEMINOLE FL 34642

2. Principal Place of Business

2a. Mailing Address

21 470-129th AVE E

26 470-129th AVE E

3. Date Incorporated or Qualified
06/30/1989

3a. Date of Last Report
03/27/1995

Applied For
Not Applicable

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

23 City & State

28 City & State

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

MADEIRA BEACH FL

MADEIRA BEACH FL

24 Zip 33708 25 Country USA

29 Zip 33708 30 Country USA

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BARRETT, ELIZABETH
7571 RIDGE ROAD
SEMINOLE FL 34642

81 Name ELIZABETH BARRETT

82 Street Address (P.O. Box Number Is Not Acceptable)
470 129th AVE E

83

84 City MADEIRA BEACH

FL

85 Zip Code 33708

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

Elizabeth Barrett

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P ☐ DELETE
NAME BARRETT, ELIZABETH
STREET ADDRESS 7571 RIDGE ROAD
CITY-ST-ZIP SEMINOLE FL

1.1 TITLE P ☒ Change ☐ Addition
1.2 NAME BARRETT, Elizabeth
1.3 STREET ADDRESS 470-129th Ave. E.
1.4 CITY-ST-ZIP MADEIRA BEACH, FL 33708

TITLE ST ☐ DELETE
NAME GERALD, SMITH
STREET ADDRESS 7571 RIDGE ROAD
CITY-ST-ZIP SEMINOLE FL

2.1 TITLE ST ☒ Change ☐ Addition
2.2 NAME Smith, GERALD
2.3 STREET ADDRESS 470-129th Ave. E.
2.4 CITY-ST-ZIP MADEIRA BEACH, FL 33708

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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

Elizabeth Barrett
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)