

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 24, 1999 8:00 am
Secretary of State

02-24-1999 90092 009 ***150.00

DOCUMENT # M48902

1. Corporation Name

JACQUELINE A. BRITTAIN, INC.

Principal Place of Business

% JACQUELINE A. BRITTAIN
17770 NW 240TH ST
OKEECHOBEE FL 34972
US

Mailing Address

% JACQUELINE A. BRITTAIN
17770 NW 240TH ST
OKEECHOBEE FL 34972
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/24/1987

4. FEI Number

59-2780288

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

BRITTAIN, JACQUELINE A.
4023 S.W. 69TH TERR.
MIRAMAR FL 33023

10. Name and Address of New Registered Agent

81 Name JACQUELINE A. BRITTAIN

82 Street Address (P.O. Box Number is Not Acceptable)
17770 N.W. 240th St.

83

84 City OKEECHOBEE

FL

85 Zip Code 34972

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

Jacqueline A. Brittain
Signature, typed or printed name of registered agent and title if applicable.

JACQUELINE A. BRITTAIN

1-14-99

DATE

12. OFFICERS AND DIRECTORS

TITLE DP
NAME BRITTAIN, JACQUELINE A.
STREET ADDRESS 4023 S.W. 69TH TERR.
CITY-ST-ZIP MIRAMAR FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DP
1.2 NAME BRITTAIN, JACQUELINE A.
1.3 STREET ADDRESS 17770 N.W. 240th St.
1.4 CITY-ST-ZIP OKEECHOBEE, FL 34972

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

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

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

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

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Jacqueline A. Brittain* JACQUELINE A. BRITTAIN 1-14-99 941-357-2899
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/98)