2008 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # M79845

1. Entity Name
PAPPY'S RESTAURANT, INC.

Principal Place of Business	Mailing Address
% CHRISTINE JAMIESON 1000 BAYVIEW AVE. PANAMA CITY, FL 32401	% CHRISTINE JAMIESON 1000 BAYVIEW AVE. PANAMA CITY, FL 32401

DO NOT WRITE IN THIS SPACE

03082008   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
59-2908231	Not Applicable

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

6. Name and Address of Current Registered Agent

JAMIESON, CHRISTINE
1000 BAYVIEW AVE.
PANAMA CITY, FL 32401

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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Christine Jamieson*

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)

DATE 3.12.08

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10.   OFFICERS AND DIRECTORS

TITLE	PD
NAME	JAMIESON, CHRISTINE
STREET ADDRESS	5229 MELISSA DRIVE
CITY-ST-ZIP	PANAMA CITY, FL 32404

TITLE	SD
NAME	DONLEY, LIESELOTTE C.
STREET ADDRESS	5214 PARK ST.
CITY-ST-ZIP	PANAMA CITY, FL

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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NAME	
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TITLE	
NAME	
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CITY-ST-ZIP	

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04/01/08-80011-004 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Christine Jamieson* Christine Jamieson 3/12/08 850-785-6611

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #