

FILE NOW: FILING FEE AFTER MAY.1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

9:11:41 PM 7:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N42562** (1)

1. Corporation Name

SONNY'S REAL PIT BAR-B-Q ADVERTISING FUND, INC.

Principal Place of Business

Mailing Address

**217 N WESTMONTE #3019
ALTAMONTE SPRINGS FL 32714**

**217 N WESTMONTE #3019
ALTAMONTE SPRINGS FL 32714**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/15/1991

3a. Date of Last Report

04/20/1994

4. FEI Number

59-3055333

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 2605 MAITLAND CENTER PKWY

26 2605 MAITLAND CENTER PKWY

Suite, Apt. #, etc

Suite, Apt. #, etc

22 SUITE C

27 SUITE C

City & State

City & State

23 MAITLAND, FL

28 MAITLAND, FL

Zip

Country

Zip

Country

24 32751-7139

25 USA

29 32751-7139

30 USA

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐ **\$5.00 May Be Added to Fees**

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☐ **\$68.75 Supplemental Fee Not Required**

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**YARMUTH, ROBERT N.
217 N WESTMONTE #3019
ALTAMONTE SPRINGS FL 32714**

81 Name

ROBERT N. YARMUTH

82 Street Address (P.O. Box Number is Not Acceptable)

2605 MAITLAND CENTER PARKWAY, SUITE C

83

84 City

MAITLAND,

FL

85 Zip Code

32751-7139

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

(Signature of registered agent or registered agent's authorized representative)

(Signature of Registered Agent for whom required after 1/1/95)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D
NAME	YARMUTH, ROBERT N.
STREET ADDRESS	867 S. GRANT STREET
CITY ST ZIP	LONGWOOD FL
TITLE	D
NAME	YARMUTH, JEFFREY T.
STREET ADDRESS	1525 INDIAN DANCE COURT
CITY ST ZIP	MAITLAND FL
TITLE	D
NAME	YARMUTH, WILLIAM B.
STREET ADDRESS	2713 AVENUE OF THE WOODS
CITY ST ZIP	LOUISVILLE, KY
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

11 TITLE	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY ST ZIP	
21 TITLE	☐ Change ☐ Addition
22 NAME	
23 STREET ADDRESS	
24 CITY ST ZIP	
31 TITLE	☐ Change ☐ Addition
32 NAME	
33 STREET ADDRESS	
34 CITY ST ZIP	
41 TITLE	☐ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	
44 CITY ST ZIP	
51 TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY ST ZIP	
61 TITLE	☐ Change ☐ Addition
62 NAME	
63 STREET ADDRESS	
64 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)(b), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robert Yarmuth

4/12/95
Date

(407)660-5888
Telephone Number