

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2005 08:00 AM
Secretary of State

DOCUMENT # P00000114065

1. Entity Name
RUSTY'S PUB, INC.



Principal Place of Business
**8970-15 103RD ST.
JACKSONVILLE, FL 32210**

Mailing Address
**8970-15 103RD ST.
JACKSONVILLE, FL 32210**

DO NOT WRITE IN THIS SPACE



01122005 No Chg-P CR2E034 (10/03)

4. FEI Number
59-3685649

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**TOLSON, JOHN F JR
462 KINGSLEY AVE. STE 101
ORANGE PARK, FL 32073**

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstalling)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE **P**
NAME **NUNLEY, WILLIAM L**
STREET ADDRESS **8970-15 103RD ST.**
CITY-ST-ZIP **JACKSONVILLE BEACH, FL 32240**

TITLE **VP**
NAME **NUNLEY, AGNES M**
STREET ADDRESS **8970-15 103RD ST.**
CITY-ST-ZIP **JACKSONVILLE, FL 32210**

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01/20/05-80016-025 158.75

**DO NOT WRITE
IN THIS SPACE**

12. 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 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:

Agnes M. Nunley
Agnes M. Nunley

14 Jan 05

(904) 771-4199

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #